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ABSTRACT

This handbook is designed as a guide for nursing supervisors and hospital administrators to help them decrease unnecessary overlap and increase efficiency of nursing staff and related allied health professionals through job analysis. Three chapters and five appendixes are included. Chapter I deals with the meaning of job analysis, qualitative aspects of job analysis, basic structure of jobs, and uses and users of data. Chapter II is concerned with proper use of a job analysis, including definition of terms and job analysis techniques. Chapter III deals with the task inventory method, analysis of task data, and inventory administration. The appendixes provide more comprehensive, detailed information necessary for conducting a job analysis, including a systems approach to manpower analysis, an example of an individual job description, descriptions of selected CODAP programs (Comprehensive Occupational Data Analysis Program, a computerized occupational data analysis system which inputs and performs calculations upon raw data from job inventories), instructions for administering the survey, and replications of the actual task analysis form developed for nurses and related health care professionals. (LAS)

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Job analysis for nurses and related health care professionals

a task inventory approach

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prepared under a Regional Medical Program of Texas contract
by Roy R. Van Cleve
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From the author . . .

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—Roy R. Van Cleve

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What job analysis can do

The importance of cautious and efficient procedures in dealing with patients and the rising costs of health care have made it increasingly important that professionals in the field perform their jobs with utmost proficiency. This handbook is a guide for nursing supervisors and hospital administrators in decreasing unnecessary overlap and increasing efficiency of nursing staff and related allied health professionals through job analysis.

Roy R. Van Cleve, the author of this document, has an extensive background in the field of modern job analysis theory and methodology. He has applied this experience in developing a method for using the process with nurses and related health care professionals through Regional Medical Program of Texas funds. His work with RMPT involved creating a task inventory survey instrument by utilizing existing military health care professional task inventories in consultation with a civilian health care professional advisory group. The survey developed was then field tested by health care professionals such as registered nurses, licensed vocational nurses, staff nurses, nursing aides and unit clerks at Providence Hospital in El Paso and Seton Hospital in Austin. This test validated his procedure and made this document possible.

Job analysis is a technique to obtain job information by separating the work performed in a given job into duties, tasks and elements; distinguishing the relationships these factors bear to each other, and ascertaining working conditions and both physical and mental demands of the work upon the individual. It primarily involves inventorying tasks performed by individuals. The task inventory method derives work information in standardized, quantifiable form. Through computer programming, the development of empirical job descriptions are possible.

The computer process used is called Comprehensive Occupational Data Analysis Programs (CODAP). Computer programs and facilities for using this procedure are located at the Human Resources Laboratory at Lackland Air Force Base, the Management Department of the School of Business Administration at the University of Texas at Austin and Texas Transportation Institute at Texas A&M University.

Primary use of the data is the preparation of a job description. Jobs can thus be standarized according to a detailed description of the job, duties and tasks performed, and of the equipment and facilities required.

After data is collected which accurately shows what the individual actually does in his everyday work routine, it is possible to address matters such as why the individual does his job, and the skills and skill levels required. Uses of the data obtained from job analysis are virtually unlimited.

Task inventory data can be used to establish a viable classification system which can alleviate unnecessary work overlap and standardize pay scales, assuring equal pay for equal work. Job analysis can illuminate training and educational needs and generally provides an empirical base for effective manpower utilization.

Van Cleve, who holds a bachelor's degree in military science; a master's degree in general management, and will receive a doctoral degree in management, marketing and economics in May, suggests that the survey instrument be evaluated for applicability in each hospital used and revised where needed. He says the success of the inventory is highly dependent upon the complete cooperation of participants. Survey completion at Providence and Seton hospitals took an average of one hour and five minutes when administered in a group setting. Van Cleve roughly estimates that the computer-related cost per individual in groups up to 125 persons would be between $6 and $10.

This manual is divided into chapters and appendices. The chapters provide an explanation of the method and its uses. The appendices provide more comprehensive, detailed information necessary for conducting a job analysis, including a systems approach to manpower analysis, an example of an individual job description, descriptions of selected CODAP programs, instructions for administering the survey, and replications of the actual task analysis form developed for nurses and related health care professionals.

Chapter I

What is job analysis?

Different forms of job analysis have been used as techniques to obtain job information since the early part of this century. It was used immediately after World War I to classify personnel for jobs and ultimately formed the basis for the Dictionary of Occupational Titles. Since then job analysis techniques have been used to provide various types of job information, and have been defined to suit the type of information desired.

Thus the term job analysis has been used with so many shades of meanings over the past 50 years there is some confusion as to just what it does include.

However, generally speaking analysis of jobs today is the application of a technique that falls into two general catagories: 1) Job Qualitative Analysis, to develop information for personnel operations; and 2) Job Quantitative Analysis, to develop information for engineering purposes.

These two types of analyses are presented in the following table to show areas of similarities and dissimilarities:

Data collection techniques

Qualitative (Personnel)

a. Observation
b. Interview of individuals
c. Questionnaire
d. Position specification
e. Technical Committees
f. Task inventory

Quantitative (Engineering)

a. Observation
b. Interview of management
c. Method analysis
d. Time and motion study
e. Motion and still photography

Information obtained

Qualitative

a. Duties
b. Tasks
c. Skills
d. Knowledges
e. Abilities
f. Responsibilities
g. Effort
h. Working conditions
i. Machines and equipment

Quantitative

a. Duties
b. Tasks
c. Movements
d. Time involved
e. Motions involved
f. Methods employed
g. Machines and equipment

Purposes and uses of information

Qualitative

a. Personnel selection
b. Personnel placement
c. Personnel promotion
d. Training
e. Change in job content
f. Changes in organizational structure
g. Standardization of job titles and duties
h. Improvement in safety and working conditions
i. Performance evaluation
j. Personnel inventory and budget

Quantitative

a. Establishment of standards
b. Work simplification
c. Improvement of machinery and equipment
d. Improvement of operating sequence
e. Economy of motion, time and effort
f. Production analysis

Approached

Qualitative

a. From worker's viewpoint

Quantitative

a. From job operations

Ultimate purpose	
Qualitative	*Quantitative*
The analysis of the job to determine the minimum personnel requirements for satisfactory performance.	The analysis of the job to determine the best method of utilizing the man/machine interface.

Table I

As the table shows the approach, data collection techniques and information obtained by each method fall into separate categories and are used for different purposes.

Job analysis—qualitative (personnel)

By definition analysis is the separation of things into their component parts and the orderly examination and classification of those parts. Job analysis then is the application of analytical methods and techniques to the study of jobs. It involves separating the work performed in a given job into duties, tasks and elements; distinguishing the relationship the duties, tasks and elements bear to each other and to the entire job; ascertaining the conditions under which the work is performed; and discovering the mental and physical demands that the work makes upon the incumbent. From this information the minimum qualifications necessary for a worker to possess to perform the job satisfactorily can be determined. Thus the purposes of Qualitative Job Analysis are:

1. To determine what different jobs exist, their nature, and their relationship to each other; and what the incumbent of each job is required to do and how.
2. To provide management with detailed information needed to carry out the functions that deal intimately with jobs and the job incumbents.
3. To supply detailed information of the job—how and why it is performed, what tools and materials are used, and what duties are particularly important.
4. To supply detailed information about the work performed and the conditions under which it is performed.
5. To supply detailed information about the scope and levels of responsibilities of the jobs, the objectives and boundaries and the supervisory relationships.

From this information the minimum job requirements can be established. Job analysis provides the basic data which makes it possible to determine where and to what degree jobs are related, and therefore determines which relationships provide the basis for movement from one job to another.

Basic structure of jobs

Since there is a basic structure common to all jobs, it is possible to apply a method to the study and understanding of all jobs. The term "job" is applied to a particular unit in the hierarchy of work for the production of goods and services. The work hierarchy has as its base the work operations that a single worker performs in doing his job. Its upper limit is formed by the work operations accomplished by groups of individuals combined into organizations. The names given to the units that compose this range of work operations are (1) positions/jobs, (2) duties, (3) tasks, and (4) elements.

Position—the indivisible *physical* unit of the organization is the individual. The basic *functional* unit is the work capable of being performed by the individual. The term "position" is applied to this fundamental unit of the work hierarchy. A position occurs at the point where the physical and functional structures of the same organization coincide in a given individual. Each position has a combination of characteristics which distinguishes it, and by which it may be recognized:

a. It has a definite scope and purpose.
b. It requires the fulltime services of one individual.
c. It involves work which usually utilizes related skills, knowledges and abilities.
d. It is usually established and formally recognized in an organizational table/chart.
e. It exists whether occupied or vacant.

Job—the term "job" is applied to a group of identical positions. All positions are subject to variations at any point in their common structure. The variations may occur in scope and purpose, duties added or deleted, method of performing each duty, including the material used, or in the standard followed. These variations are significant only to the extent that they influence what is required of the position incumbents.

Duty—The next significant unit in the work hierarchy is the "duty." A duty is one of the distinct major activities involved in the work performed, or required to be performed, by the job incumbents. A job is made up of one or more duties. Each duty has certain distinguishing characteristics:

a. It is usually recognized as being one of the job incumbent's principal responsibilities.
b. It occupies a reasonable portion of the incumbent's work time.
c. It occurs with reasonable frequency in the work cycle.
d. It involves work operations which utilize related skills, knowledges and abilities.
e. It is performed for some purpose, by some method, according to some standard with respect to speed, accuracy, quality or quantity.

Tasks—Each duty is made up of one or more "tasks." A "task" is one of the work operations that constitutes a logical and necessary step in the performance of a duty. It is the work unit that deals with the methods, procedures and techniques by which duties are carried out. Each task has the following characteristics:

a. It occupies a reasonable portion of the work time spent in performing the duty.
b. It occupies a reasonable portion of the incumbent's work time.
c. It involves closely related skills, knowledges and abilities.
d. It is performed according to some standard.

Element—Tasks are made up of "elements." These are the smallest steps into which it is practicable to subdivide any work operation without analyzing separate motions, movements and mental processes involved. An element is a meaningful and useful grouping of the basic work unit. It is the work unit that deals with the details of *how* the methods, procedures and techniques involved in a task are carried out. Normally, job descriptions do not require "tasks" broken down to elements.

By these definitions it can be seen that the job is the unit with which the personnel transactions of selection, training, classification and assignment are usually carried out. In order to determine the identifying job requirements and individual qualifications, facilitate the distribution of personnel by providing broadly trained replacements, and by reducing training time through facilitating more accurate estimates of personnel requirements, it can be readily seen that a method of gathering these factors is essential, and that job analysis forms the basic process of obtaining that data.

Uses and users of data

Uses—The detailed data on the occupational and qualifications requirements of jobs, obtained through the process of job analysis, provide the source material for such uses as:

a. Identification of positions completely and accurately.
b. Description of duties and tasks in sufficient detail and orderly sequence, to provide a work picture of the work activity of the position.
c. Clarification and provision of sufficient detail concerning each of the duties in a specific position/job to make evident the manner in which, if any, the position/job may be diluted or shredded out.
d. Provision of information to assist in determination of worker qualifications necessary for successful performance of the duties required by the position/job.
e. Provision of information relative to the development of a classification system.
f. Assistance in establishing job relationships and job family groupings.
g. Provision of information relative to the development of entry level aptitude and proficiency tests.
h. Assistance in establishing validity of, or justification for such personnel actions as upgrading, transfer, training, assignment and reassignment.
i. Provision of information on functional interrelationships of jobs within an organization.
j. Provision of information for use in the establishment of job performance standards or specifications.
k. Provision of research data for development of job proficiency rating or evaluation scales.
l. Provision of information concerning occupational utilization of personnel with physical and/or mental limitations.

Users—These same detailed data serve the following users in the manner indicated:

a. *Management* uses the information to determine the kinds and numbers of jobs needed, the lines of authority and supervision and, ultimately, to establish and modify organizations and improve organizational structure.
b. *Personnel* uses the information to match the qualifications of the individuals to the performance requirements of the job.
c. *Trainers* use the information to fit content, emphasis, duration of training and the techniques of instructions to the characteristics of the job for which the training is being conducted.

Chapter II

How to use job analysis

The basic step in the analysis of a job position is the separation of the position into its constituent duties, tasks and, if necessary, elements. Job analysis terminology is not entirely uniform in the various methods designed or adopted for use by private industry and the Armed Forces. In many cases, job analysis terminology has been developed to meet specific situations which established the needs for a job analysis program. Thus difficulty may arise if a set of terms is generalized and extended to situations which differ radically from those for which the terms were originally designed. For that reason the terms used in the job analysis method outlined in this manual will be defined. Terms such as position, job. duty, task and element have already been defined in Section I.

Definition of terms

Job Analysis—It is the determination of tasks which comprise the job and of the skills, knowledges, abilities, and responsibilities required of the worker for successful performance and which differentiate the job from all others.

Job Description—The written description of the work performed by the worker, including a brief statement of functions and duties, an enumeration of the tasks which comprise the job and the physical demands of the job are all included in a job description.

Job Specification—A job specification consists of identifying information, a summary of the work performed and a summarized description of the education, training, knowledges, abilities, skills and other requirements which the worker must possess to perform the work successfully. It is called a specification because it specifies the "hiring" requirements of the job.

Job Evaluation—Job evaluation is a systematic method of appraising the worth of each job in relation to other jobs in an organization. It is never completely accurate as it depends on the judgment of the evaluators, but these are judgments based on detailed studies of the jobs and the comparisons of their contents. The aim of job evaluation is to ensure that the workers are fairly paid in relation to each other and for the work they are required to do.

Job analysis technique

A skillful job analysis is one which results in accurate information, complete in all pertinent details, presented in usable form and thus requires the application of a standardized procedure. The technique used to discover the facts that are necessary to describe the tasks of the job and contain the worker qualifications necessary for the successful performance of the job is based on the "Job Analysis Formula" or the WHAT, HOW, WHY method as the following four questions must be answered: WHAT does the worker do? WHY does the worker do it? HOW does the worker do it? And what are the SKILLS INVOLVED when it is being done? The skills involved incorporate responsibilities, job knowledge, mental application, dexterity and accuracy.

There are three parts to the analysis of any job:

a. The job must be completely and accurately identified;

b. The tasks of the job must be completely and accurately described;

c. The requirements the job makes upon the individual for successful performance must be indicated.

Job identification: Proper identification of a job requires that the information contained in the identification must distinguish it from all other jobs and must clearly indicate the scope of the tasks the job encompasses. A number of workers performing identical tasks on identical equipment using the same materials and utilizing the same skills and abilities are grouped under a single job title which is specifically identified.

The first part of job analysis, then, is to identify a job with a title that describes the position or positions. Jobs having common duties and tasks are then grouped and a title applicable to all like jobs is produced.

Methods of obtaining information: There are a number of ways of securing job data. The following methods will be discussed here:

a. Job specifications written by the supervisors.

b. Job specifications written by the position incumbents.

c. Group interviews.

d. Questionnaires.

e. Technical committees.

f. Observation and interviews.

g. Task inventories.

Job specifications written by supervisors: The advantage of this form of data collection is that it con-

tributes to the training of the supervisors by aiding them in the analysis of the jobs they supervise. The need to analyze and describe jobs will require the supervisors to review the revision of duties within their units and may lead them to improve both the organization of their units and the division of work therein. Also, the preparation of job specifications by the supervisors, if not too costly in terms of time, is an excellent preliminary to a job analysis survey, since it will provide a basis for and will reduce the time required for observation and interviews. This method can be employed when the employees are not available, or for a new or vacant position. However, it can be misleading unless it is followed up by a careful interview by a trained job analyst with both the supervisors, and, if possible, employees since the supervisors may not be entirely objective about the work they supervise. They may wish it to seem more important than it is or they may take advantage of a vacancy to reorganize the work of the unit and, as a consequence, change the job content without realizing it.

Job specifications written by the position incumbent: The principal advantage to this method of data collection is the full participation of all personnel. This participation will normally ensure strong support for the program by individual incumbents who will generally take the time and make the necessary effort to do a good job if the program is fully explained. This method saves time for the job analysts; the resulting data will probably be reasonably reliable and normally require less extensive follow up by the interviewer. However, this method is hard to apply except in reasonably tight-knit working communities, such as a single company of a single department, and requires the strong support of the chief executive and a good selling job to the individuals.

Group interviews: This method of data collection provides for a high degree of employee participation and employee interest. Reliability is usually very high with group interviews, especially with executives. The employees frequently develop new attitudes and insights with respect to their work. If the data gathering is tied into the training program, it can provide an excellent and logical basis for the determination of training needs. The disadvantage of the group interview method is that it can be used effectively only in rather special circumstances. It is the most sophisticated method and requires that the job analyst/interviewer be a skilled conference leader, especially if the group is not articulate.

Questionnaire: The questionnaire has several advantages. It can save time when a large group is to be analyzed and allows for maximum employee participation, thus creating greater interest in and support of the program by the employees. It helps the participants to see their own jobs more clearly and objectively and brings such an anomaly to light as a position which was established for a specific group of duties being used for totally different duties. Its disadvantage is that it can rarely be used successfully in a large organization since questionnaires are usually designed with only a limited group of jobs in mind. Lengthy preparation in construction and the accompanying instructions on the program's objectives and the methods of completing the questionnaire are required and must be detailed and most explicit. It is almost impossible to design a questionnaire which will provide all the necessary information. The average employee is seldom skilled in writing what he does, let alone how he does it. Also, some employees will fail to do their jobs justice while others will make theirs seem more important that it really is.

Technical committee: Use of the technical committee is advantageous in that it relies on subject specialists as job analysts. These specialists are charged with writing the job descriptions and this can be accomplished in a minimum amount of time. It presupposes the agreement of the subject specialists with the final results since they participated in the production of those results. However, the expense may be prohibitive because of the number of high salaried specialists who must devote a considerable amount of time to the project. Also it may be unreliable if the senior specialists have lost touch with the day-to-day activities of their subordinates. To ensure greater reliability, arrangements should be made to secure current job data from a representative sample of technical advisors by independent job analysts.

Observation and interview: This method provides the job analysts the most complete and accurate first hand information possible, thus minimizing the likelihood of errors or misinterpretation. It obviates the necessity of asking employees to take working hours to comply with the program and it allows trained analysts to evaluate the importance of tasks and to sift the essential from the nonessential. This provides for standard terminology and allows the employees to ask questions about the program and receive meaningful answers. However, as it requires a large amount of analyst time, the observation and interview method, especially if a large number of jobs are to be analyzed, is difficult to use in the case of geographically dispersed positions and may narrow employee position participation to only one position for each type job instead of the more complete coverage of the questionnaire method.

Task inventory: The advantage of the task inventory is that information on a large number of widely dispersed jobs can be gathered relatively rapidly through a simple procedure which takes a minimum of employee time and effort. The data are received in a standardized form. Reliability is enhanced since the employees often recognize what they do and do

not do more readily than they normally could describe it unaided. This reduces the number of items that employees must recall on their own, since they need only to recall those tasks, if any, not recorded in the inventory and the job data can be easily and readily kept up to date. The principal disadvantages of the task inventory method are the initial writing of adequate task statements and the method of compiling written-in job information.

Tasks description and job requirement data: Those then are the methods by which jobs can be completely and accurately identified. The description of the tasks and the requirements the job makes upon the individual are obtained when the following data are compiled:

What the worker does: What the worker does involves the physical and mental responses that are made to the work situation. Physically the worker may transport materials, cut, bend, grind, put together, make ready, set up, tear down, insert, regulate, clean, finish or otherwise change the position, shape or condition of the work by the expenditure of physical effort. Mentally the worker may plan, compute, judge, direct or otherwise govern the expenditure of his own or others' physical effort by a corresponding exercise of mental effort. In any given job a worker may expend any combination of physical and mental effort required by the task. Since most jobs involve more than a single task and each task may involve different physical and mental processes, all of the combinations of processes must be identified to completely identify what the worker does.

How the worker does it: How the work is done concerns the methods used by the worker to accomplish his tasks. Physically this involves the use of machinery and tools, measuring instruments and devices and other equipment, the following of procedures and routines and the movements of the worker himself. Mentally the methods lie chiefly in the "know how" that must be applied to the tasks. This may involve the use of calculations, formulas, the application of judgment or decision or the selection and transmittal of thought. The worker may have at his command several alternate methods, any of which may be used with equal success.

Why the worker does it: The "Why" outlines the scope of the job and justifies the "What" and the "How" of the work performed. The overall purpose is the sum total of the purposes of all tasks. Utmost care is necessary in ascertaining and recording the reason why each task is performed, both to clarify the overall purpose of the job in the reader's mind and to show the task relationships as the job progresses to completion of a work cycle. Failure to explain the purpose will leave the impression that the job has not been reported completely and tends to ambiguity in the description of the job.

The skills involved: This important information supplements the "What," "How" and "Why" and is required in order to be able to express the degree of difficulty of the tasks involved in the job. It consists of a listing and an explanation of the basic factors which must be considered in analyzing any job. These elements bring out the manual skills, the knowledges, abilities and other characteristics required of the worker by this job.

Responsibility: Responsibility is classified as either supervisory or non-supervisory. Supervisory responsibility is the responsibility for directing the work of others or for assisting and instructing them in their work. This exercise of responsibility requires a high degree of proficiency on the worker's part and a high utilization of the skills required for the job. Non-supervisory is responsibility for preventing damage to equipment, material or process, for preventing loss of products, for preventing injury to himself or to others and for cooperating with fellow workers and outsiders.

Job knowledge: Job knowledge defines the practical knowledge of equipment, materials, working procedures and routines which must be possessed to handle the job successfully.

Mental application: Mental application is the degree and continuity of thought, concentration, mental planning or alertness demanded by the job because of the diversity of work or the variety of problems.

Dexterity and accuracy: The manual or manipulative ability required to perform work to the degree of accuracy of precision required is identified by the dexterity and accuracy standards.

Experience: Experience may be considered as any related job, either of equivalent or lesser skill, in which an individual can secure the physical and mental abilities required to fulfill the performance requirements of a job. A study of experience necessary for a job is essential to job placement from both a recruitment and an upgrading standpoint.

Worker characteristics: The performance of a job requires the possession of certain basic or unlearned qualities of the worker. These basic or unlearned abilities are known as worker characteristics.

The ability to separate positions/jobs into duties, tasks and, where necessary, elements in order to ensure the maximum effective utilization of talents and training of the individual workers thus providing the greatest possible satisfaction with work by matching job requirements to worker capabilities at the task level is the key to the most efficient production of goods and/or services.

Sections I and II have covered the background and defined the terms used in this type of program. Appendix 1 demonstrates a systems approach to the utilization of this type of information.

Chapter III

The task inventory method

Increasingly in the field of qualitative (personnel) job analysis the task inventory method of data collection is being employed. This method combines some of the best features of the open-ended questionnaire and observation and interview techniques for obtaining data on the basic structure of jobs. The procedure provides a practical and economical means of conducting multi-organization surveys. But most important, the method derives work information in standardized quantifiable form, thus taking full advantage of the capabilities of modern electronic data processing equipment. The procedure is founded upon the results of a series of research projects extending over several years.

A task inventory is simply a list of all the significant tasks that may be performed by a worker in a given occupational area. This inventory of all significant tasks is constructed out of every possible source of occupational information. That is, a careful review of previous job descriptions, the opinions of various "experts," training programs, schools and all pertinent literature are consulted to produce a "beginning" task inventory. This task inventory is then field tested by job incumbents who edit and add additional information which is then reformulated into a revised inventory. One of the principal advantages of this type system is the validity of the data, for by obtaining data from the job incumbents the best possible information on the current job content is obtained.

Not only does the job incumbent indicate job content by duties and tasks but this method also addresses how involved the incumbents are in the tasks and how long they spend on discrete tasks. Research has shown that the relative time spent scale utilized in this method is valid over time and, thus, once we have obtained relative time spent, we can convert that into estimated percent time values.

Analysis of task data

In completing the task inventiory, each job incumbent supplies identification and biographical information, checks the level of involvement with appropriate tasks and rates the tasks performed on a 7-point scale showing the relative time spent on each task performed compared to all other tasks performed in the incumbent's current job. The ratings range from 1 (very-much-below-average time spent) through 4 (average time spent) to 7 (very-much-above-average time spent). Only tasks performed in the incumbent's current job are marked and rated. The time spent-current job ratings are then the basis for the computation of job descriptions.

Each job inventory completed according to this procedure is, in a sense, the description of an individual's job in that it specifies the work activities and shows how time is distributed among the tasks listed. Thus, each individual in the occupational survey generates a separate job description (Sample—Appendix 2, page 17). Computation of the individual duty descriptions within the job description is based on the assumption that any person performing one or more tasks in a duty is performing the duty. The percent time spent by an incumbent in each duty is obtained by summing the percentages for all tasks in that duty.

As a first step in the analysis of occupational survey data, tasks and duty job description for each respondent are computed using the Comprehensive Occupational Data Analysis Programs (CODAP). A description of selected CODAP programs is included in Appendix 2.

The computer converts each individual's relative time spent responses to percent time spent. All of the incumbent's time spent entries are summed and the total obtained is taken as constituting 100 percent of the time spent on the job. Each time spent entry is then divided by the total number of time spent entries, and the quotient is multiplied by 100 to give the percentage of time spent on each task. These percentages represent the task descriptions for the individuals.

These individual job descriptions then are the basis for computing composite job descriptions for groups of job incumbents. The composite descriptions consist of tasks performed by members of the group and the percent of time spent performing each of the tasks. These data are presented in a variety of ways and formats that are useful for analyzing homogeneity of task performance, and for comparing the work of one group with other groups.

As a further explanation of the computation of job type descriptions, the technique employed involves hierarchical grouping, and clustering programs. Job types are computed without regard for

biographical characteristics of the incumbents. The computer compares each individual job description with every other individual in the sample in terms of percent of time spent on tasks performed. The computer locates the two individual job descriptions that are most similar and generates a single description which accounts for the incumbents' work time with the least error. In successive stages, the computer adds other incumbents to this group or forms new groups based on the similarity of their jobs. This procedure continues until all significant job types are identified and described.

As a result of the job clustering program, career ladders are organized into job types and the users of job analysis data have a documented tool which can be used in the effective management of the personnel resources of the organization.

Inventory administration

Instructions for the self-administration and group administration of task inventories are contained in Appendix 3 and 4 and on the cover sheets of each inventory.

Appendix I

A systems approach to manpower utilization

In many of today's occupational fields there is an all too familar pattern of a rapidly growing interlocking series of occupations that appear to be well integrated to the casual observer; in actuality they harbor labor wastage, overlapping functions, career isolation, job fractionation, high turnover and low career ceilings for many.

The objective of any manpower utilization effort must be the development of a manpower system which will determine what personnel actually do in their jobs; improve the personnel production methods (education and training); and build viable career pathways for all of the organization's personnel.

Information concerning jobs, duties, tasks and their requirements is the basic data needed for the development and utilization of any manpower management system. Only through the employment of such a system's approach to manpower can the objectives of cost containment, full utilization of talents and training, full employment of individual capabilities and the provision of vertical job mobility with concomitant personal growth and job satisfaction be achieved.

The nature and specificity of the information required to support a system varies according to the planned uses of the data. However, to be of greatest benefit the data must be accurate, omit nothing pertinent to the needs of the total system, and be presented in a clearly understandable and usable format. The technique for identifying, collecting, collating and analyzing these data is known as job analysis.

Job Analysis

As will be demonstrated, job analysis is the heart of any manpower utilization system (Fig. 1).

Figure 1

As such, job analysis must be a continuing program of matching personnel actions and changing requirements. It entails the systematic and continuous process of collecting, analyzing and interpreting information concerning duties and tasks as they are performed on the job. The information obtained must be quantifiable so that it can be summarized for the various jobs within a job family and then broken down into segments for particular jobs within the job family. It is only with this capability to aggregate and disaggregate job families that viable career pathways can be constructed; it is only with this capability that job similarities and differences can be demonstrated.

Individual Activity

The first step in performing job analysis is to determine just what individual activity is being performed (Fig. 2).

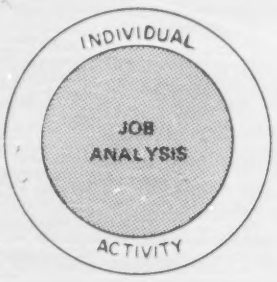

Figure 2

Individual activity tells what is being done in the job as it exists today. Information concerning tasks which are performed are related to things, data and/or people and to the physical, mental and/or interpersonal resources which the workers use. Once this information is obtained and put into behaviorally stated terms, the jobs can then be measured for their level, simple to complex, and their orientation, relative to the degree of involvement. Further, the type of skill content, insofar as its being adaptive, functional and/or specific, can be evaluated. These skill contents are defined as follows:

> *Adaptive skills* refer to those competencies which enable an individual to accept and adjust to the physical, interpersonal and organizational arrangements and condi-

tions in which a job exists.

Functional skills refer to those competencies which enable an individual to relate to things, data and people in some combination and to a degree of complexity appropriate to their abilities.

Specific content skills refer to those competencies required to perform a special job according to the specifications of the employer and according to the standards required to satisfy the market.

Thus individual activity tells what the worker does; whether it is with things, data and/or people; what physical, mental and/or interpersonal resources are required; the level, orientation and types of skills utilized. For analysis purposes, the statements from which this information is derived must be behaviorally stated.

Job Description

These behaviorally stated task statements are then combined with duty and function statements to form job descriptions (Fig. 3).

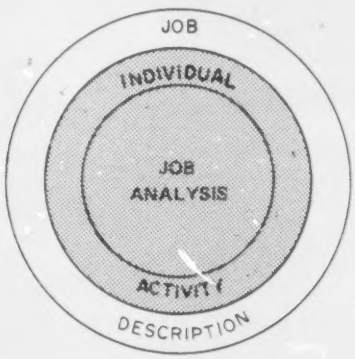

Figure 3

The term job is applied to a group of identical positions. It is the unit with which the personnel transactions of selection, training, classification and assignment are usually carried out. It involves work which normally utilizes related skills, knowledges and abilities.

In each job there are individuals performing duties. A duty is one of the job incumbent's principal responsibilities which occupies a reasonable portion of the work time and occurs reasonably frequently in the work cycle. The work operations utilize related skills, knowledges and abilities. The work is performed for a stated purpose, by a prescribed method and according to an established standard.

Duties are composed of tasks. Tasks occupy a reasonable portion of the work time spent performing a duty and occur reasonably frequently in the work cycle of the duty. Tasks involve closely related skills, knowledges and abilities. They are performed for a stated purpose, by a prescribed method and according to an established standard with respect to speed, accuracy, quality and/or quantity of work.

Thus, by definition: A job is made up of a series of *tasks*.

The primary use of this data, as indicated, is in the preparation of job descriptions. The job descriptions provide job titles and enumerate the functions, duties and tasks performed.

Classification System and Recruitment and Selection Standards

> "Classification of jobs is based upon an assessment of the complexity of the *level of tasks* which make up the jobs."

A complete classification system (Fig. 4) contains the job descriptions of all of the job families of the organization, in detail, so that the relationship of one job to another within the same job family is readily available, and ideally it sets forth the relationships of jobs in different job families. The classification system is the keystone to viable career pathways, for it is here that the interrelationships of the jobs are spelled out.

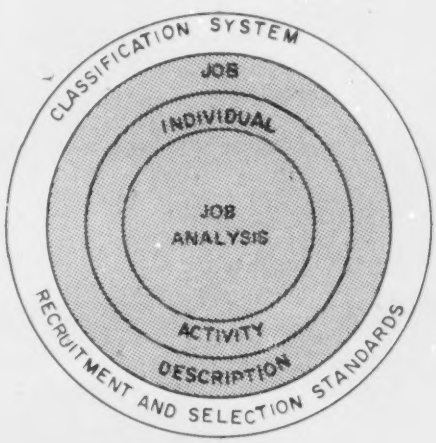

Figure 4

> "Recruitment and selection criteria are based upon the requirements or qualifications necessary to perform specific tasks."

Recruitment and selection standards (Fig. 4) are then derived from the classification system. It is only after the potential career pathway of the individual who is being recruited and selected has been examined that the total spectrum of special skills, knowledges and/or physical abilities the individual

must possess, to successfully perform in this career field, are defined. With this knowledge it is possible to devise patterned interviews and other testing procedures to place qualified individuals into career pathways in which there is vertical job mobility with concomitant personal growth and job satisfaction.

Training, Assignment, Career Development and Job Value

The four basic manpower management aspects of training, assignment, career development and job value (Fig. 5), which derive input from the classification system and the recruitment and selection standards, will be discussed in detail once their relationship to job requirements is clearly understood.

Job Requirements

The catagory of job requirements might at first glance appear to be redundant, however, other studies have shown that more often than not there are jobs still being performed for which a valid requirement no longer exists (Fig. 5).

Job requirements determine what training must be done to enable the worker to perform the series of tasks that comprise his job. The training programs must be evaluated on the suitability of their interface with the classification system and the recruitment and selection standards.

Work assignments are similarly dependent upon job requirements in that jobs, duties and tasks assigned must make full utilization of talents and training and fully employ the capabilities of the worker if there is to be job satisfaction.

Career development is likewise dependent upon job requirements for it is only through valid requirements for increased skills and knowledges that there can be an upgrading of the work force via the career pathways.

Like the other three factors, job value is also dependent upon job requirement. Job value in this context refers to the level of remuneration received for the performance of the necessary tasks. This presupposes that the tasks to be performed have some economic value and therefore there is a quid-pro-quo.

Returning now to the segments of training, assignment, career development and job value, the following additional information is provided.

Training—Training Programs

The training programs which are conducted must be of the type which support the job requirements and lead to ultimate successful employment upon their completion. The prime prerequisites of the training programs are that they be appropriate to the level of the individual selected for assignment to them and that the training provided be suitable and appropriate for the projected employment upon completion of the course(s) (Fig. 6).

Assignment—Assignment Policies

The work assignment policies must ensure that once the individuals are trained and qualified to perform higher level tasks that they are afforded the opportunity to utilize their improved talents and training and receive a measure of work satisfaction from suitably assigned jobs, duties and tasks (Fig. 6).

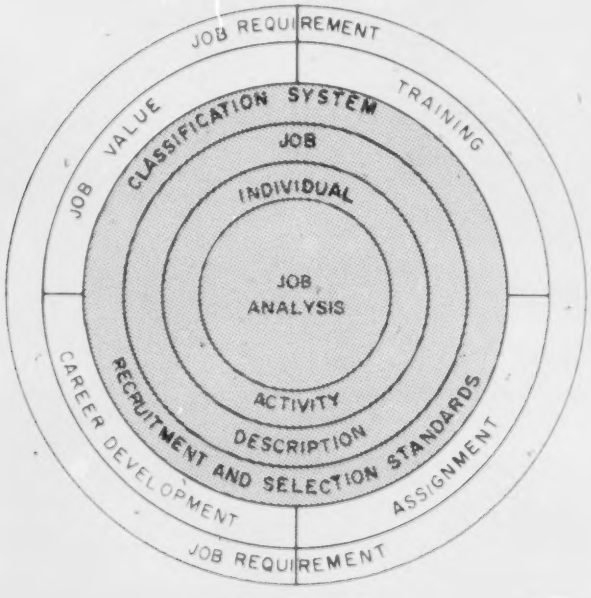

Figure 5

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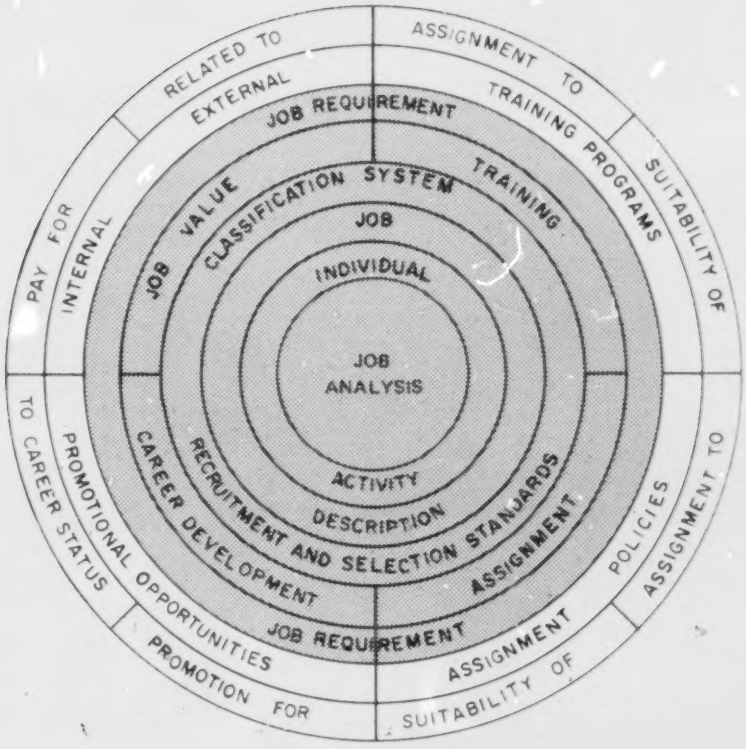

Figure 6

Career Development—
Promotional opportunities

Once the individuals are trained, qualified and have demonstrated a desire for increased job responsibilities, viable career pathways must be provided. Dead-end jobs, insofar as possible, must be eliminated, promotional opportunities demonstrated and promotions earned through productive employment must be provided (Fig. 6).

Job Value—Internal External

The level of remuneration received by the worker is controlled by both internal and external factors. The internal factors are the relationship of the job to all other jobs within the organization; while the external factors are the relationship of the jobs and the work force to the local labor market. Both of these factors must be carefully weighed to ensure that remuneration is in fact related to them and is consistent with job performance in the employment status (Fig. 6).

Employment

It can be determined, by examining the employment role of the individuals, if their individual activities, job descriptions and the job requirements are in concert. If they are not in concert then the area(s) in which change(s) must be made—training, assignment, career development and/or job value—will be apparent and corrective actions can be taken. Employment is after all the final test of the worker's worth to the organization and it is with this segment of the system that all the others must ultimately be compared (Fig. 7).

Figure 7

Feedback—Job Description Performance

The comparisons which are made must then be fed back into the system so that the continuous process of change can take place. The feedback must take two forms: (1) to the job description base so that it can be continually updated as changes in requirements and employment occur, and through that base to all other segments of the system which flow from it; and (2) to the individuals in the form of performance evaluation so that they can determine their career development progress, strengths and weaknesses, training and work experiences needed to enhance their promotional opportunities and thus increase their personal job value (Fig. 7).

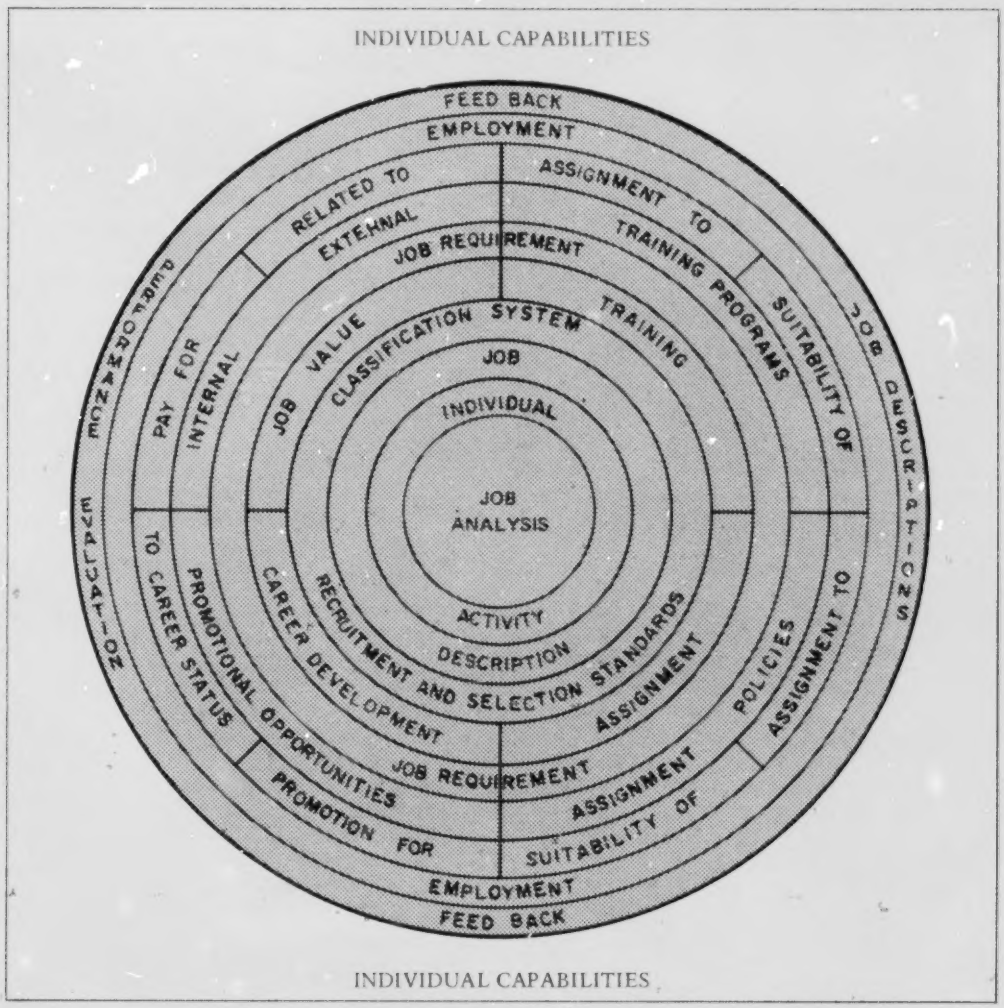

Figure 8

Individual Capabilities

Finally, the entire system is limited, on an individual basis, by the capabilities of the individuals and this factor must be taken into consideration. These capabilities can be enhanced by training programs and work experiences and that of course is the goal of the career development programs which must be an integral part of the system (Fig. 8).

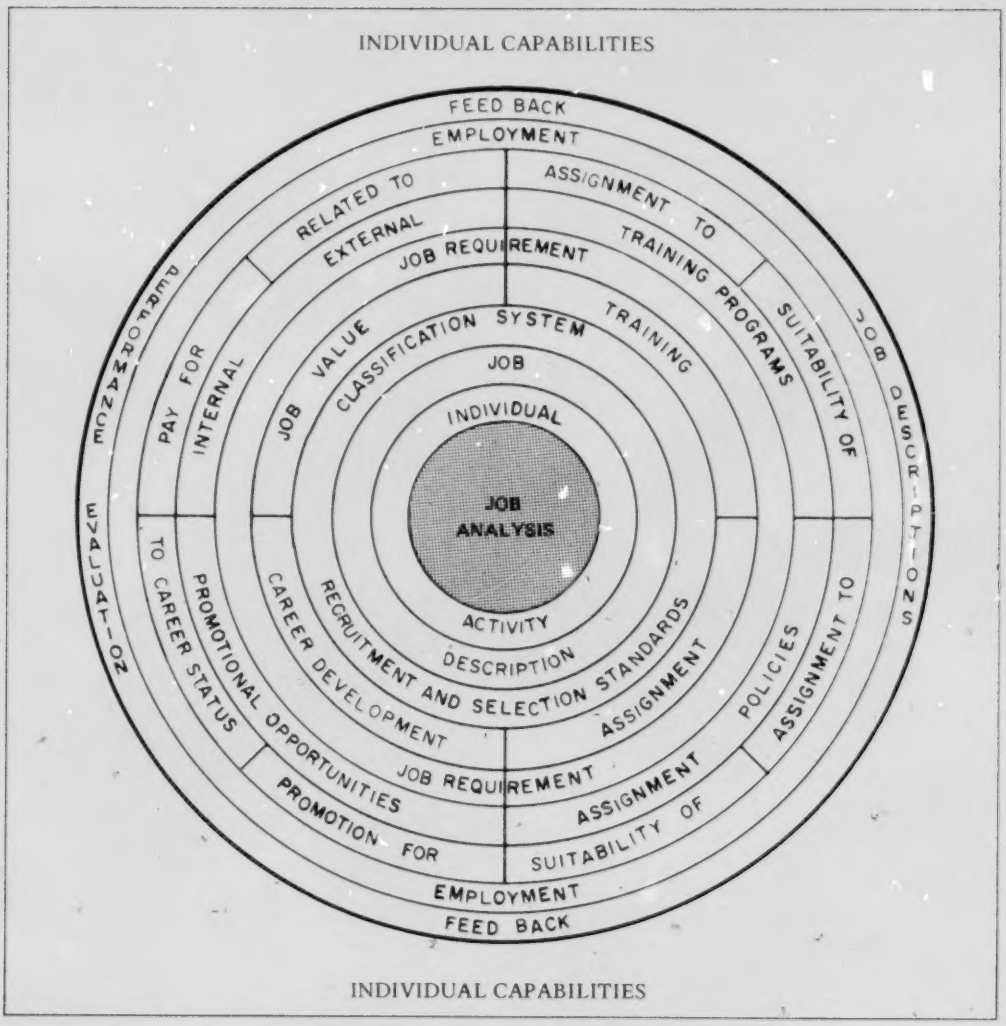

Figure 9

The System

In order to fully utilize the talents and training and provide job satisfaction the system must continuously seek to bring into consonance the individual's activities, the job descriptions, job requirements, employment and individual capabilities — when this is accomplished the ideal manpower utilization system exists. When consonance does not exist, a return to the "heart" of the matter—Job Analysis—is required and the process must be repeated. (Fig. 9).

Appendix 2

Example individual job description

TASK	JOB DESCRIPTION	CASES	TASKS	DUTIES	MBRS
		55	759	9	3

CUMULATIVE SUM OF AVERAGE PERCENT TIME SPENT BY ALL MEMBERS ..... TASK
AVERAGE PERCENT TIME SPENT BY ALL MEMBERS ..... SEQ
AVERAGE PERCENT TIME SPENT BY MEMBERS PERFORMING ..... NO
PERCENT OF MEMBERS PERFORMING .....

D-TSK	DUTY/TASK TITLE					
C 30	Feed Infants	100.00	6.88	6.88	6.88	
C 53	Help New Mother Breast Feed/Bottle Feed Infant	100.00	5.93	5.93	12.82	
C 5	Assess Infant's Response to Feeding Methods (Gavage, Nipple)	100.00	4.70	4.70	17.51	
C 89	Prepare And Take Infant To Mother	33.33	12.96	4.32	21.84	
C 52	Give Umbilical Cord Care, e.g., Clean, Dress, Remove Clamp	100.00	3.46	3.46	25.30	5
C 54	Identify/Report Abnormal Cry of Infant, e.g., Weak, High Pitc	100.00	3.46	3.46	28.76	
C 1	Wash Newborn Babies	66.67	5.14	3.43	32.19	
C 14	Counsel and Instruct Mother on Breast Feeding of Infant	66.67	5.14	3.43	35.62	
C 60	Make Provisions for Father/Relatives to See Newborn	66.67	5.14	3.43	39.05	
G 18	Sterilize Supplies	66.67	4.06	2.71	41.75	10
G 17	Sterilize Instruments	33.33	7.41	2.47	44.22	
A 9	Clean and Maintain Equipment	66.67	3.34	2.23	46.45	
A 12	Clean Ward Utility Room	66.67	3.34	2.23	48.68	
A 102	Make Entries in Cardexes	66.67	3.34	2.23	50.91	
C 80	Place Infant in Phototherapy (Bilirirubin Light)	33.33	5.55	1.85	52.76	15
B 136	Observe and Record Condition of Patients	66.67	2.62	1.75	54.51	
D 37	Gown for Sterile Procedure	33.33	4.76	1.59	56.10	
A 150	Read Professional Nursing Journal and Publications	33.33	4.32	1.44	57.54	
A 24	Coordinate Work Activities with Other Sections	33.33	3.81	1.27	58.80	
A 42	Develop or Improve Work Methods or Procedures	33.33	3.81	1.27	60.07	20
A 47	Dispose of Contaminated Materials	33.33	3.81	1.27	61.34	
A 53	Establish Vacation and Time-Off Policy	33.33	3.81	1.27	62.61	
A 54	Prepare or Process Vacation or Time-Off Applications	33.33	3.81	1.27	63.88	
A 61	Evaluate the Quality of Patient Care	33.33	3.81	1.27	65.15	
A 62	Evaluate the Utilization of Work Areas or Space	33.33	3.81	1.27	66.42	25
A 111	Orient Visitors to Ward	33.33	3.81	1.27	67.69	
A 117	Participate in Staff Meetings	33.33	3.81	1.27	68.96	
A 120	Perform General Housekeeping Duties	33.33	3.81	1.27	70.23	
A 155	Review Suggestions and Forward for Consideration	33.33	3.81	1.27	71.50	
A 164	Set Up Isolation Units	33.33	3.81	1.27	72.77	30
B 106	Identify Personal or Emotional Problems or Needs of Patients	33.33	3.81	1.27	74.04	

C	49	Explain/Answer Parent's Questions Regarding Infant Care	33.33	3.81	1.27	75.31	
C	94	Set Up and Regulate Isolette or Incubator	33.33	3.81	1.27	76.58	
C	13	Collect Urine Specimen From Infants	33.33	3.70	1.23	77.81	
G	16	Prepare Items for Sterilization	33.33	3.70	1.23	79.05	35
A	121	Perform Patient Admission, Transfer or Disposition Procedure	33.33	2.88	.96	80.01	
A	125	Perform Terminal Disinfection Procedures	33.33	2.88	.96	80.97	
A	133	Prepare Consultation Requests or Laboratory Slips	33.33	2.88	.96	81.93	
A	173	Witness, Patient, Parent or Guardian Signatures on Legal Doc	33.33	2.88	.96	82.88	
B	119	Make Beds Other Than Postoperative or Recovery	33.33	2.88	.96	83.84	40
B	166	Prepare Patients for Physician's Examination or Treatment	33.33	2.88	.96	84.80	
B	180	Review or Interpret Laboratory Reports or Report Findings to	33.33	2.88	.96	85.76	
B	187	Serve Prescribed Diets to Patients	33.33	2.88	.96	86.72	
B	189	Set Up or Use Suction Equipment	33.33	2.88	.96	87.68	
B	196	Take and Record Blood Pressures	33.33	2.88	.96	88.64	45
C	66	Monitor Temperature of Infant in Isolette/Incubator	33.33	2.88	.96	89.60	
D	81	Treat Newborn's Eyes With Prophylaxis	33.33	2.88	.96	90.56	
T	2	Arrange Furniture in Patient's Room	33.33	1.44	.48	91.04	
A	10	Clean Minor Surgery or Examination Rooms	33.33	1.44	.48	91.52	
B	18	Administer Intramuscular Medications	33.33	1.44	.48	91.99	50
B	27	Administer Oral Medications	33.33	1.44	.48	92.47	
B	64	Assist with Spinal Puncture	33.33	1.44	.48	92.95	
B	76	Check Off Completed Patient Care in Cardex to Insure Complia	33.33	1.44	.48	93.43	
B	120	Make Nursing Diagnosis	33.33	1.44	.48	93.91	
B	132	Notify Physicians of Patient's Arrivals and Status	33.33	1.44	.48	94.39	55
B	151	Perform Isolation or Reverse Isolation Techniques	33.33	1.44	.48	94.87	
B	197	Take and Record Pulses, Temperatures and Respirations	33.33	1.44	.48	95.35	
C	10	Check Rooting Reflex	33.33	1.44	.48	95.83	
C	11	Check Startle Reflex/Moro Reflex	33.33	1.44	.48	96.31	
C	35	Counsel and Support Parents of Child with Genetic Disorder	33.33	1.44	.48	96.79	60
C	50	Gavage Premature Infant	33.33	1.44	.48	97.27	
C	51	Give Premature Infant Care, e.g., Position in Incubator, Feed	33.33	1.44	.48	97.75	
C	97	Teach Postpartum Classes, e.g., Bath Demonstrations, Feeding	33.33	1.44	.48	98.23	
D	44	Make Entries on Labor/Delivery Record	33.33	1.44	.48	98.71	
D	80	Take Fingerprints, Footprints	33.33	1.44	.48	99.18	65
A	151	Recopy Physician's Orders	33.33	.95	.32	99.50	
A	5	Assign Nurses to Duties	33.33	.72	.24	99.74	
A	8	Check Master Diet List Against Physician's Orders	33.33	.72	.24	99.98	

Appendix 3
Comprehensive Occupational Data Analysis Program (CODAP)

CODAP: comprehensive occupational data analysis programs

CODAP is a computerized occupational data analysis system which inputs and performs calculations upon raw data from job inventories. It is designed to furnish users with a wide variety of reports that facilitate the identification of individual and group job characteristics and the detection of between-job similarities and differences. Some selected CODAP program descriptions follow:

INPSTD: raw data editing and input

This program reads task titles, task responses, and background data from tape or card input. It edits the data, converts the raw task responses to percentages, constructs data vectors for each case, reorganizes the data to a standard history data format, and writes the formatted data on the output tape for use in subsequent programs. INPSTD will accept a maximum of: 928 background and/or computed variables, 1000 task variables, 26 duty variables, 20,000 cases, and 927 non-zero task responses per case.

JOBDEC: calculating composite job descriptions

This program calculates and prints composite job descriptions for groups formed during the hierarchial grouping process (JOBGRP) or for special groups whose membership is defined in terms of some combination of background or computed variables (JOBSPC). Both duty and task job descriptions may be reported in high to low sequence of either "average percent time spent by all members" or "percent of members performing." (A duty is a functional area comprising a number of tasks and, hence, is a summary report.)

A job description produced through JOBDEC provides the following information: duty/task number, duty/task title, percent of members performing each duty/task, average percent time spent by members performing, average percent time spent by all members, and cumulative average percent time spent by all members.

GRPSUM: summarizing job descriptions

This program calculates and prints a report of either the percent of members performing each task in the job inventory or the average percent time spent on each task by all members for any number of groups whose composite job descriptions were computed by JOBDEC or JOBSPC. The summarized data is printed in task number order and the group descriptions are ordered according to the sequence of the input request cards. GRPSUM does not print task titles, as does PRIJOB, nor does it have PRIJOB's facility to specify criteria for excluding tasks from the summary report.

GPSUM: summarizing job descriptions (format 2)

This program is a version of GRPSUM containing certain desirable features adapted from PRIJOB. Like GRPSUM, GPSUM2 calculates and prints a report in duty/task order of either the percent of members performing each task in the job inventory or the average percent of time spent on each task by all members of groups whose composite job descriptions were computed by JOBDEC or JOBSPC. Whereas, GRPSUM prints no task statements and carries all percentages to three decimal places, GPSUM2 does print task statements and rounds off all percentages to whole numbers.

PRIJOB: calculating primary job identifiers

This program calculates and prints a report of those tasks which are determined to be "primary identifiers" of job types. Primary identifiers may be defined as the top x-number of tasks in a group job description in terms of percent of members performing or average percent time spent by all members. Primary identifiers may also be defined as those tasks performed by a specified minimum percentage of the group members of which exceed a specified average percent time spent value. This program allows a number of groups to be aligned in a single report for comparative purposes.

JOBIND and INDJOB: calculating individual job descriptions

The JOBIND program calculates and prints job descriptions for individual cases. Both duty and task descriptions may be reported. Output will be task statements sequenced from high to low percent time spent, together with their percent time spent values and cumulative percentages. Selected background information may also be printed at the top of each

description. JOBIND has six options for selecting cases: (1) by last two digits of service number; (2) by every Nth case beginning with a specified KPATH sequence number; (3) by meeting specified requirements on one to nine background variables; (4) by membership in a specified job type group; (5) by case control number; (6) randomly, using a random number generator. The selected descriptions may be sorted in KPATH order, in random order, by background variable, or in case control number order. The six options for selecting cases may also be used to create new categorical membership variables which are inserted in the variable dictionary as computed variables.

The INDJOB program also calculates and prints individual job descriptions, but prints only task identification numbers and percent time spent values for duties or tasks in duty/task sequence. A single report prints information for all cases in a columnar format. There are only three options for selecting cases: (1) by case control number; (2) by meeting specified requirements on one to nine background variables; (3) by membership in a specified job type group. INDJOB has no sort options.

GRPDIF: difference comparison between job descriptions

This program calculates and reports the difference between two job descriptions in terms of percentage of members performing each task and/or average percent time spent. Difference values are presented in ascending or descending order on either value (from largest negative to largest positive difference or vice versa) or in task number order.

AUTOJT: automated job type selection program

This program calculates, evaluates, and reports between-group differences for specified pairs of groups whose job descriptions were computed by JOBDEC or JOBSPC. Six comparison options are used: (1) differences in average percent time spent on each task; (2) differences in average percent time spent on each duty; (3) differences in percentage of members performing each task; (4) differences in number of tasks accounting for a major portion of average percent time spent; (5) differences in number of duties accounting for a major portion of average percent time spent; (6) differences in average number of tasks performed. As many as 850 pairs of groups can be compared in one run of AUTOJT.

VARSUM: summarizing background and computed variables

This program computes and reports frequently distributions within specified intervals, makes total frequency counts, and calculates means and standard deviations on selected background and computed variables for any group of individuals whose job description has been generated by JOBDEC or JOBSPC. VARSUM can process data on as many as 20,000 cases.

DIST2X: computing a two-way distribution

This program distributes a group of individuals on two variables (a row variable and a column variable). The group distributed may be the total sample or the cases coded "1" or "0" on a categorical membership variable. The row and column variables may be alpha or numeric, and intervals of unequal width may be defined for any variable. The data presented may be frequencies within cells or frequencies *and* percentages within cells. The percentages are computed based on individual row frequency totals, or on individual column frequency totals, or on the total N for all rows and columns. Any or all three sets of percentages may be displayed in the two-way table. A "total" category for rows and a "total" category for columns is automatically included for percentages and/or frequencies. The total number of cases counted and the total number of valid cases are given for each row and column and for total rows and total columns. Valid cases include all *distributed numeric* data. Only valid cases are used in the computation of means and standard deviations. Optionally, an "other" category may be included for rows and columns. Inclusion of the "other" category causes *all numeric* data to be counted as valid. Another option provides for the computation of means and standard deviations for individual rows and total rows and/or individual columns and total columns. Only cases defined as valid are used in computing means and standard deviations. A summary of selected information appears at the end of the report. Any number of reports may be generated in one program execution.

AVALUE: calculating average value

For each task in a job inventory, this program calculates and prints the mean and standard deviation of a selected background or computed variable, using all valid responses of individuals in a specified group who perform the task. Task titles and the number of valid respondents on each task are also reported. Average values are optionally sequenced from low-to-high average value, high-to-low average value, or in task number order. Tasks with fewer than x-number of valid respondents may be removed from the main report to a supplementary report. AVALUE can be calculated for any group of individuals who can be identified on some range of a background or computed variable or by the intersection of up to nine variables.

TSKNDX: calculating average task ratings

This program has the same options as AVALUE, except that it is used with task ratings rather than with background or computed variables. TSKNDX can also provide the following additional task information not available in AVALUE: (1) percent of members performing; (2) average percent time spent by members performing; (3) average percent time spent by all group members; (4) cumulative sum of average percent time spent by all group members. TSKNDX is primarily used to compute average task difficulty ratings.

RXXNDX: computing interrater reliability

This program computes and reports for a group of raters the average interrater reliability coefficient of a single rater and the stepped up reliability coefficient for the total group of raters. The program is most often used in conjunction with sets of task difficulty ratings made by a large number of supervisory personnel.

TSKDST: distributing means and standard deviations of task ratings

This program computes and reports the distribution, mean, and standard deviation of the mean task ratings and the standard deviations of the ratings for each task. The input to TSKDST is the punched output furnished by TSKNDX.

ASFACT: reporting secondary factor data

If the tasks in a job inventory are rated on a second scale such as "amount of training required," the data is handled through the ASFACT program. The ASFACT program reports the following information on each task for any group of individuals whose job description has been computed by JOBDEC or JOBSPC: (1) frequency distribution of members responding on the secondary factor (0 to 9 scales); (2) total number of respondents; (3) number of respondents with values outside the specified range; (4) arithmetic mean and standard deviation of acceptable responses.

VARGEN: computing new variables

This program calculates new computed variables by applying input data to the task values of each case. The task values may be time spent percentages or "do—don't do" values (1,0). The input data consists of a vector of weights, a scaling (standardizing) factor and a specified calculation formula (five options). A newly created variable is given a variable identification number and is added into the computed variable portion of the case data records on the history data tape.

PREGEN: generating new predictors

This program creates new computed or background variables for input to other CODAP programs, principally the correlation and regression program (CORREG) according to certain standardized options, as follows: the new variable can be the sum of two variables, the difference between two variables, the product of two variables, or the ratio of two variables. Each option allows for adding a constant if so desired. Variables may also be created by setting certain values of a variable out of range and then, either leaving these values unchanged during the generation of the new variable, or setting them equal to zero or to some constant. This option is most frequently used to enable the selection of a specific subsample of cases by creating a categorically coded membership variable representing in-range and out-of-range cases ("1" or "0," respectively). Variables created at an early point in the program run may be used to create additional variables at some later point. Up to 500 variables can be created in a single PREGEN run.

CORREG: correlation and regression program

This program package extracts up to 100 computed and background variables from a CODAP KPATH or history data tape and computes correlation matrices and regression problems.

The correlation program computes and prints the correlation matrix, number of valid and invalid cases in the sample, and means and standard deviations of variables. These same computations are also put on tape for future reference, and they also remain in core if they are to be fed into the regression program immediately.

The regression program has two options. One option computes regression equations for various combinations of full and restricted models and evaluates the difference between full and restricted models with an F-test. The value and the probability of the computed F-ratio are reported.

The second option is designed as an aid to building an appropriate regression model. In this option, a series of regression problems is computed iteratively. Beginning with the best combination of three predictors at iteration 1, the best remaining combination of three predictors is added to the model at each subsequent iteration. The "best remaining combination" is that which adds the most to the value of R^2 when used in conjunction with all combinations of predictors selected at previous iterations. Predictors may be used more than once during the iterative process. Iterations are continued until the increase in the value of R^2 over the previous iteration is less than some amount specified by the requester. Variable ID's, R^2 values, and the error sum of squares are reported for each iteration. The stan-

dard and raw score weighs for each variable as they exist upon completion of the final iteration are reported, as well as the regression constant.

Either one or both regression options may be requested at the same time.

OVRLAP: relating responses to each other

This program generates an overlap or similarity matrix of all possible paired comparisons between individual cases. Similarity is expressed as a percentage of common tasks performed (TSKOVL) ,or as the total overlapping percentage of time spent on tasks (TIMOVL). Overlap in terms of percent time spent is the preferred option in most studies. OVRLAP can handle up to 2,000 cases and 1,000 tasks.

GROUP: clustering individuals and groups of individuals

This program uses the similarity matrix computed in the overlap (OVRLAP) program to form clusters of cases. The grouping technique, called "collapsing the matrix" or "hierarchical grouping," involves repeated searching for those individuals or partially formed clusters which have the highest (or lowest) remaining similarity, depending on whether a "maximizing" or "minimizing" process was requested. The "maximizing" option is always used for job survey data.

Each new clustering or "collapse" is called a "stage" and the vectors of similarity values for the clusters being merged are combined according to a specified mathematical algorithm to form an integrated cluster. Several formulas for combining groups are available. The collapsing process continues until a single group has formed which contains all cases in a study.

KPATH and PRKPTH: ordering a history data tape and printing a history data report

After OVRLAP and GROUP have been completed, the KPATH program assigns sequence numbers to individual cases in such a way that each pair of individuals or groups which are merged during the grouping process will have a contiguous block of KPATH sequence numbers.

PRKPTH enables the user to select variables and printout formats to produce a report of the case data values for the selected background and computed variables. The data to be printed is obtained from a history data tape which may be in case ID or KPATH order. The data is not sorted and therefore the output will be in case ID or KPATH order.

DUVARS: computing a duty variable for each case

This program uses task data to compute duty values for each case and displays the duty values in the form of PRKPTH. Three duty variable options are available: (1) percent time spent in each duty by each case; (2) number of tasks performed in each duty by each case; (3) percent of tasks performed within each duty by each case as a function of his total number of tasks performed. This program is used principally as an aid in selecting meaningfully different job-type groups.

GRMBRS: reporting group membership

This program produces an information report that identifies the two groups combining at each stage of the hierarchical grouping process. The information includes the stage number, the number of members in the combined group, the number of members in each of the combining groups, range of KPATH sequence numbers for the combining groups, the average percentage of overlap between the members of the combining groups, and the average percentage of overlap within the combined group.

DIAGRM: graphical presentation of hierarchical grouping actions

This program uses data from the GRMBRS program to generate a treelike diagram that visually displays the order in which groups merged during the hierarchical grouping process. Each group is represented by a rectangular block of data containing the same information found in GRMBRS. Rows and columns of asterisks show the branches leading from a group to its subgroups. Control cards can be used to limit the number and type of groups displayed by DIAGRM.

MBROVL: overlapping individual job descriptions with a composite job description

This program computes the overlap of individual job descriptions with the composite job description for the group and reports the individual overlap values, their mean and standard deviation, and an array of selected background data for each case. The format of the report is similar to PRKPTH, except that the cases are sequenced from highest to lowest overlap with the composite job description and only cases that are members of the selected group are included. Reports on a number of groups can be handled in one program execution. This program is useful in studying the homogeneity of membership in a group whose composite job description was computed by JOBDEC or JOBSPC.

MTXPR1: printing an overlapped matrix

This program calls for the subroutine OVRLAP to overlap all possible pairings of a set of composite (group) job descriptions and then uses the program MTXPRT to print the between-group overlap values

in matrix form. Overlap may be computed in terms of average percent time spent on tasks or in terms of number of tasks performed in common. The maximum number of groups that can be input to MTXPR1 is 100.

JD2HDT: adding job descriptions to history data tape

This program adds average job descriptions for groups to a history data tape as additional cases. Each of the new composite cases is given the next sequential case control number.

PRDICT: printing dictionary of variable titles

This program prints a report containing the identification codes and descriptive titles of all background and computed variables peculiar to a particular study. The identification codes are used in calling for data to be reported by the PRKPTH and VARSUM programs, or to be acted upon by the VARGEN, PREGEN, PROGEN, JOBIND, AVALUE, or TSKNDX programs.

JOBINV: printing of duty and task titles

This program prints a listing of the duty and task titles included in a job inventory. The titles are listed in task number sequence within each duty, and the format calls for two columns per page.

BCDEXT: reordering and extracting reports from the BCD report tape

All reports generated by CODAP can optionally be placed on a BCD output tape for future recall. The BCDEXT program extracts reports selected by control cards from the BCD file, prints them out in the same order as the input requests with continuous page numbering, and furnishes a table of contents with page number references.

PROGEN: program generation program

This program permits the CODAP expert to add, extract, and manipulate data in the CODAP system in ways not encompassed by the standard CODAP programs and to do so with a minimum amount of additional programming and without requiring thorough indoctrination on the CODAP system. PROGEN uses a combination of FORTRAN statements and shorthand operation codes to generate a special purpose program to read the KPATH or history data tape, either of which contains the entire data file for each case, and perform operations upon it. New variables can thereby be created and added to the CODAP variable dictionary. This program also has the facility to reconvert percent time task values for each case to the original raw response form, perform operations on the raw responses, and convert them back to percentages.

Appendix 4

Instructions for survey administration

The occupational task inventory for nurses and related health care professionals may be administered in a group or on an individual basis.

Group administration

For group administration, survey administrators should study the task analysis manual carefully so that they will thoroughly understand the process and can answer in a meaningful way any questions posed.

If possible, all of the personnel scheduled to take part in the survey should be assembled at the same time in order to avoid a makeup administration. The inventory booklets and pencils with good erasers should be distributed before the personnel arrive.

During the administration of the inventory the administrator and proctors, if any, should circulate about the room to answer questions and see that the proper procedures are being followed. Depending upon the group content, close proctoring may be required to see that each person understands what is required and is proceeding according to instructions.

As each person finishes the inventory, the administrator, or a proctor, should go over the booklet to be sure that it has been properly completed. The job incumbents should be thanked for their time, effort and cooperation.

After everyone who is taking the survey is seated, the survey administrator should read the following instructions aloud:

"You are here today to take part in a job survey. We need accurate information about the work done in your profession. The job inventory is the means by which you can supply this information. The inventory consists of some background information and a list of work activities called tasks which are grouped into divisions of work called duties. This job inventory is not a test and the results will not be used to evaluate you, your supervisor or your work group.

"In filling out the inventory you are responsible for giving correct information about the work you do. The information you give will be highly beneficial to your profession. It will help provide better job descriptions; improved training courses and job standards; it will be used to provide improved career pathways for greater personal growth and work satisfaction.

"To complete the inventory:

"First, fill in the Background Information and Equipment Listings sections.

"Then, turn to page 1 of the booklet and read all of the tasks under every duty. As you read, mark an (X) in the involvement column beside each task in which you are involved.

"In the blank spaces at the end of each list, please write in any tasks that are not listed in which you are involved.

"Then turn back to page 1 again. This time as you go through the booklet, please mark an (X) in the TIME SPENT column of all of the tasks you previously indicated an involvement with. 'Time spent' means the total time you spend on the task you are rating compared with the time you spend on each of the other tasks which form your job. The 7-point TIME SPENT scale you will use is explained at the bottom of each page in the booklet.

You will rate a task '1' if you spend very much less time on this task than you spend on the other tasks; you will rate a task '2' if you spend much less time; and so on up the ladder to a rating of '7' for each task on which you spend very much more time than you spend on other tasks.

"Begin now to fill in the Background Information pages, then go ahead and mark the tasks with which you are involved and then make your tasks rating."

Self-administration

The task inventory may also be completed by individuals without aid of a survey administrator. The following text could serve as a cover sheet for the self-administered survey.

The job inventory is a means for determining duties and tasks performed by job incumbents in the health care field. It is not a test, and the results will not be used to evaluate you, your supervisor or your work group. The job information provided by you, however, will help provide better job descriptions. It may also lead to improvements in training courses and job standards and improved career pathways which will provide for greater personal growth and work satisfaction.

You are being surveyed as a representative of your specialty. Your contribution is important to both yourself and your profession. Please follow the instructions carefully in giving complete and accurate information about the tasks you are involved in doing.

In completing the inventory, you are to respond in terms of your present regular job. *Disregard tasks*

that are not part of your current regular work assignments, no matter how often you performed those tasks in the past. Also, additional tasks you take over for a short period of time for someone else while they are away from their jobs are not reported. In recalling tasks, go back far enough in time to get a true picture of your job. If your work changes from one season to another, you may have to back a full year. If there was a permanent change in your job during the past year, go back to the time just after that change. You probably will need to go back not less than three months nor more than a year to recall all of the tasks which comprise your job.

Now accomplish all the following steps in order:

1. *Fill in the Job Inventory Background Information and Equipment Listings.*

2. *Begin with Duty A, read each task statement under each duty in the inventory. As you read, place an (X) mark in the involvement column beside each task in which you have involvement.*

3. *In the blank spaces below the tasks in each duty, add all the tasks you do that are not listed. If some tasks do not fit under any duty, write them in on the blank page at the end of the inventory booklet. Please be very thorough about adding tasks as this is an essential part of completing the inventory.*

4. *Then turn back to Duty A again. You are now to make a TIME SPENT rating for each task you have checked or added. The 7-point rating scale you are to use is explained at the bottom of each page and in the general instructions on the booklet. Remember that you are comparing only your own tasks in your current job with each other. Please be sure to rate every task that you marked or wrote in.*

When you have completed your ratings, please check your work and return the booklet to the appropriate office.

Additional general instructions

Part III encompasses the bulk of the inventory. If questions arise concerning the exact definitions of the terms: **assist, do, do/supervise** and **supervise,** the following definitions have been developed for these terms:

(a) *Assist* —*To help someone else do this task. The other person or persons are responsible for the actions, your role is that of a helper only.*

(b) *Do* —*To perform the task yourself and be responsible for the proper performance of the action.*

(c) *Do/Supervise* —*To on occasion perform the task yourself and on other occasions supervise others in the performance of the task or to supervise others while all of you are engaged in performing the task.*

(d) *Supervise* —*To oversee the work of others in the performance of the task; you do not take part in the action itself but are responsible for its accomplishment.*

Concerning the 1-7 scale dealing with the relative time spent in performing each of the tasks, each number rating may be defined in the following manner:

None — Very Little — Average — A Lot

0 — 1 2 3 — 4 5 — 6 7

(1) *Very Much Below Average—You do the tasks but not very often and/or it doesn't take very much time; very little time.*

(2) *Below Average—You do the tasks and it takes some of your time but it is still a minor part of the time.*

(3) *Slightly Below Average—You do this task more often than the tasks marked below average but less than those marked average.*

(4) *Average—You do these tasks as indicated an average amount of time; these are the tasks you perform as shown on the chart in the middle range.*

(5) *Slightly Above Average—Has the same relationship to above average that (3) had to below average.*

(6) *Above Average—You do these tasks and they take a major portion of your time, either in length or frequency.*

(7) *Very Much Above Average—These are the tasks which you do most frequently or take the largest part of your time due to the length of time required.*

Examples

The following are several completed inventory item examples:

Task A 5.
Assign Nurses to Duties

INVOLVEMENT

a	b	c	d
()	(X)	()	()

TIME SPENT SCALE

1	*2*	*3*	*4*	*5*	*6*	*7*
(X)	()	()	()	()	()	()

Involvement=b which means that you DO this task
Time Spent Scale=1 which means you spend very

little time performing this task in comparison with all the other tasks you perform.

Task A 40.

Determine work priorities.

a	*b*	*c*	*d*
(X)	()	()	()

1	*2*	*3*	*4*	*5*	*6*	*7*
()	()	()	(X)	()	()	()

Involvement=a which means you assist someone else in doing this task and they are responsible for it.

Time Spent Scale=4 which means that you spend an average amount of time performing this task in comparison with all the other tasks you perform.

Task B 140.
Order or coordinate patient diets with food service

a	*b*	*c*	*d*
()	()	()	(X)

1	*2*	*3*	*4*	*5*	*6*	*7*
()	()	()	()	()	()	(X)

Involvement=d which means you supervise others who actually perform this task.

Time Spent Scale=7 which means that you spend a great deal of time performing this one task. Possibly there is trouble in the diet kitchen.

Appendix 5

The survey

Part I

BACKGROUND INFORMATION

LAST NAME FIRST NAME MIDDLE INITIAL SOCIAL SECURITY NO.
___ — ___ — _____

NAME OF HOSPITAL CITY

PRESENT WORK ASSIGNMENT—JOB TITLE DATE
/ /
mo. day yr.

CLASSIFICATION OF HOSPITAL YOU ARE WORKING IN:

	LARGE (BEDS)	MEDIUM (BEDS)	SMALL (BEDS)
PUBLIC	( )	( )	( )
PRIVATE	( )	( )	( )
GENERAL	( )	( )	( )
SPECIALTY	( )	( )	( )

WORKING SOMEWHERE OTHER THAN IN HOSPITAL ( ) WHERE?

CHECK **ONE** TO INDICATE THE NURSING AREA IN WHICH YOU WORK NOW:

ANESTHESIA	( )	INTENSIVE CARE	( )
CARDIOLOGY	( )	NEUROLOGY/NEUROSURGERY	( )
COMMUNITY HEALTH	( )	NURSING EDUCATION	( )
CENTRAL STERILE SUPPLY	( )	NURSING ADMINISTRATION	( )
EAR/NOSE/THROAT	( )	OBSTETRICS	( )
EMERGENCY ROOM	( )	OPERATING ROOM	( )
EYE	( )	ORTHOPEDICS	( )
GENERAL MEDICINE	( )	PEDIATRICS	( )
GENERAL MEDICINE—SURGERY	( )	PSYCHIATRY	( )
GENERAL SURGERY	( )	RECOVERY ROOM	( )
GYNECOLOGY	( )	RESARCH	( )

OTHER ( )—SPECIFY .....

CHECK ONE OR MORE BOXES TO INDICATE YOUR EDUCATIONAL BACKGROUND:

DID NOT COMPLETE HIGH SCHOOL ..... ( )
HIGH SCHOOL GRADUATE ..... ( )
NURSES AIDE TRAINING ..... ( )
LICENSED VOCATIONAL NURSES TRAINING ..... ( )
BASIC NURSING PROGRAM OTHER THAN BACCALAUREATE ..... ( )
POST BASIC NURSING PROGRAM (NON DEGREE) IN EXCESS OF ONE YEAR ..... ( )

BACHELORS DEGREE IN NURSING ..... ( )
BACHELORS DEGREE IN NON-NURSING FIELD ..... ( )
DOCTORAL CANDIDATE ..... ( )
DOCTORAL DEGREE IN NURSING ..... ( )
DOCTORAL DEGREE IN NON-NURSING FIELD ..... ( )

INDICATE YOUR TOTAL MONTHS NURSING CARE EXPERIENCE IN THE FOLLOWING:

TOTAL MONTHS IN CURRENT JOB _____
TOTAL MONTHS IN CURRENT HOSPITAL _____
TOTAL MONTHS IN NURSING CARE PROFESSION _____

DO YOU SUPERVISE OTHER PERSONNEL? YES ( ) NO ( )

IF SO HOW MANY? 1-2 ( )
3-5 ( )
6-10 ( )
11-20 ( )
OVER 20 ( )

MY CURRENT JOB UTILIZES MY TALENTS AND TRAINING:

NOT AT ALL ( )
VERY LITTLE ( )
FAIRLY WELL ( )
QUITE WELL ( )
VERY WELL ( )
EXCELLENTLY ( )
PERFECTLY ( )

I FIND MY CURRENT JOB:

EXTREMELY DULL ( )
VERY DULL ( )
FAIRLY DULL ( )
SO SO ( )
FAIRLY INTERESTING ( )
VERY INTERESTING ( )
EXTREMELY INTERESTING ( )

I RECEIVE THE **MOST** JOB SATISFACTION WHEN I AM **PRIMARILY** ENGAGED IN:

GIVING NURSING CARE ( )
SUPERVISION OF NURSING CARE ( )
ADMINISTRATION OF NURSING SERVICE ( )
ADMINISTRATION OF NURSING EDUCATION PROGRAMS ( )
TEACHING NURSING CARE ( )
RESEARCH IN NURSING ( )

RATE YOUR ABILITY TO GIVE QUALITY NURSING CARE IN EACH OF THE AREAS LISTED BELOW USING 1-7 SCALE SHOWN:

ANESTHESIA ____
CARDIOLOGY ____
COMMUNITY HEALTH ____
EAR/NOSE/THROAT ____
EMERGENCY ROOM ____
EYE ____
GENERAL MEDICINE ____
GENERAL MEDICINE-SURGERY ____
GENERAL SURGERY ____
GYNECOLOGY ____

INTENSIVE CARE ____
NEUROLOGY/NEUROSURGERY ____
NURSING EDUCATION ____
NURSING ADMINISTRATION ____
OBSTETRICS ____
OPERATING ROOM ____
ORTHOPEDICS ____
PEDIATRICS ____
PSYCHIATRY ____
RECOVERY ROOM ____

OTHER (SPECIFY) .....

1. very much below average
2. below average
3. slightly below average
4. average
5. slightly above average
6. above average
7. very much above

Part II

CHECK THE TYPES OF EQUIPMENT WHICH YOU USE IN YOUR PRESENT POSITION:

( ) ANESTHESIA MACHINE
( ) APNEA ALARM—INFANT
( ) ARTIFICIAL KIDNEY MACHINE
( ) AUDIOMETER
( ) AUDIO-VISUAL EQUIPMENT
( ) AUTOCLAVE—GAS
( ) AUTOCLAVE—STEAM
( ) BACTERIOLOGICAL WATER TESTING KIT
( ) BALKIN FLAME
( ) CARDIAC DEFIBRILLATOR
( ) CARDIAC MONITOR
( ) CAST CUTTER—ELECTRIC
( ) CAUTERIZATION EQUIPMENT
( ) CLOSED CHEST DRAINAGE EQUIPMENT
( ) COLLINS RESPIROMETER
( ) COLLINS VITALOMETER
( ) CROUPETTE
( ) CRYO SURGICAL UNIT
( ) ELECTROCARDIOGRAPHY MACHINE
( ) ELECTROENCEPHALOGRAPHY MACHINE
( ) ELECTRONIC MONITOR—BLOOD PRESSURE
( ) ELECTRONIC MONITOR—TEMPERATURE, PULSE, RESPIRATION
( ) EMERSON POST OPERATIVE PUMP
( ) ENDOSCOPE
( ) FETOSCOPE
( ) HEART LUNG MACHINE
( ) HEATING PAD—CHEMICAL
( ) HEATING PAD—ELECTRIC
( ) HUMIDIFIER
( ) HYPOTHERMIA BLANKET K/THERMIA
( ) INCUBATOR—ARMSTRONG
( ) INCUBATOR—ISOLETTE
( ) INHALATOR—STEAM
( ) IPPB MACHINE—BENNETT
( ) IPPB MACHINE—BIRD
( ) IRON LUNG—SAM
( ) IRRIGATION DRAINAGE EQUIPMENT
( ) K-PAD, HOT OR COLD
( ) MICROSCOPE—LABORATORY
( ) MICROSCOPE—OPERATING
( ) NEBULIZER—ULTRASONIC
( ) OPHTHALMOSCOPE
( ) OXYGEN ANALYZER
( ) OXYGEN GAUGE
( ) OXYGEN MASK
( ) OXYGEN TENT
( ) OXYGEN TENT HOOD
( ) PACEMAKER
( ) PATIENT LIFT
( ) PORTABLE OXYGEN EQUIPMENT
( ) PULSE METER
( ) RESUSCITATOR—AMBU
( ) RESUSCITATOR—BIRD
( ) RESUSCITATOR—PNEOLATER
( ) SITZ BATH—DISPOSABLE
( ) SITZ BATH—ELECTRIC
( ) SITZ BATH—PORTABLE
( ) SPHYGMOMANOMETER—ANERIOD
( ) SPHYGMOMANOMETER—MERCURY
( ) STETHOSCOPE
( ) SUCTION EQUIPMENT BUILT-IN WALL UNIT
( ) SUCTION EQUIPMENT FIELD PORTABLE UNIT
( ) SUCTION EQUIPMENT HERMOVAC
( ) SUCTION EQUIPMENT PHARYNGEAL
( ) SUMP DRAINAGE EQUIPMENT
( ) TURNING FRAME—CIRCLE ELECTRIC
( ) TURNING FRAME—FOSTER
( ) TURNING FRAME—STRYKER
( ) ULTRASONIC LAMP
( ) UNDERWATER DRAINAGE EQUIPMENT
( ) VAPORIZER
( ) VESTIBULAR SIMULATOR
( ) OTHER (SPECIFY):
.....
.....
.....
.....
.....

Part III
A task inventory approach

	INDIRECT PATIENT CARE/ADMINISTRATIVE	INVOLVEMENT a	b	c	d	TIME SPENT SCALE 1	2	3	4	5	6	7
A - 1	ACCOUNT FOR NARCOTICS OR CONTROLLED DRUGS	()	()	()	()	()	()	()	()	()	()	()
A - 2	ARRANGE FURNITURE IN PATIENTS ROOM	()	()	()	()	()	()	()	()	()	()	()
A - 3	ASSEMBLE TRACTION EQUIPMENT OTHER THAN BALKIN FRAME	()	()	()	()	()	()	()	()	()	()	()
A - 4	ASSIGN NON-PROFESSIONAL NURSING SERVICE PERSONNEL TO DUTIES	()	()	()	()	()	()	()	()	()	()	()
A - 5	ASSIGN NURSES TO DUTIES	()	()	()	()	()	()	()	()	()	()	()
A - 6	CHAPERONE NON-MEDICAL INVESTIGATORY PERSONNEL	()	()	()	()	()	()	()	()	()	()	()
A - 7	CHECK ADEQUACY OF / RESTOCK CARDIOPULMONARY EMERGERY SETS	()	()	()	()	()	()	()	()	()	()	()
A - 8	CHECK MASTER DIET LIST AGAINST PHYSICIANS ORDERS	()	()	()	()	()	()	()	()	()	()	()
A - 9	CLEAN AND MAINTAIN EQUIPMENT	()	()	()	()	()	()	()	()	()	()	()
A - 10	CLEAN MINOR SURGERY OR EXAMINATION ROOMS	()	()	()	()	()	()	()	()	()	()	()
A - 11	CLEAN WARD KITCHEN	()	()	()	()	()	()	()	()	()	()	()
A - 12	CLEAN WARD UTILITY ROOM	()	()	()	()	()	()	()	()	()	()	()
A - 13	COLLECT OR MAINTAIN HEALTH-RELATED STATISTICS	()	()	()	()	()	()	()	()	()	()	()
A - 14	CONDUCT INSPECTIONS OR WARDS OR OTHER AREAS WHERE NURSING SERVICE PERSONNEL ARE EMPLOYED	()	()	()	()	()	()	()	()	()	()	()
A - 15	CONDUCT NURSING ARE CONFERENCES	()	()	()	()	()	()	()	()	()	()	()
A - 16	CONDUCT, PLAN OR COORDINATE HOSPITAL TOURS	()	()	()	()	()	()	()	()	()	()	()
A - 17	CONDUCT STAFF DISCUSSIONS ON CONFLICTS BETWEEN PATIENTS AND STAFF	()	()	()	()	()	()	()	()	()	()	()
A - 18	CONDUCT STAFF MEETINGS	()	()	()	()	()	()	()	()	()	()	()
A - 19	COORDINATE ADMINISTRATIVE MATTERS WITH WARD NURSE	()	()	()	()	()	()	()	()	()	()	()
A - 20	DIRECT HOUSEKEEPING ACTIVITIES	()	()	()	()	()	()	()	()	()	()	()
A - 21	SUPERVISE HOUSEKEEPING PERSONNEL	()	()	()	()	()	()	()	()	()	()	()
A - 22	COORDINATE NURSING SERVICE WITH COMMUNITY GROUPS	()	()	()	()	()	()	()	()	()	()	()
A - 23	COORDINATE WITH DISASTER CONTROL SUPERVISOR ON NURSING CARE CAPABILITY OF WARD OR SECTION	()	()	()	()	()	()	()	()	()	()	()
A - 24	COORDINATE WORK ACTIVITIES WITH OTHER SECTIONS	()	()	()	()	()	()	()	()	()	()	()
A - 25	COUNSEL INDIVIDUALS ON CAREER PROGRESSION OPPORTUNITIES	()	()	()	()	()	()	()	()	()	()	()
A - 26	COUNSEL PERSONNEL ON PERSONAL PROBLEMS	()	()	()	()	()	()	()	()	()	()	()
A - 27	COUNSEL PERSONNEL ON PROFESSIONAL EVALUATIONS	()	()	()	()	()	()	()	()	()	()	()
A - 28	DIRECT THE PREPARATION OF SUBORDINATES PERFORMANCE RATING	()	()	()	()	()	()	()	()	()	()	()
A - 29	ESTABLISH OR EVALUATE PERFORMANCE STANDARDS FOR NURSING CARE	()	()	()	()	()	()	()	()	()	()	()
A - 30	EVALUATE DUTY PERFORMANCE OF NURSING SERVICE PERSONNEL	()	()	()	()	()	()	()	()	()	()	()
A - 31	PREPARE PERFORMANCE REPORTS	()	()	()	()	()	()	()	()	()	()	()
A - 32	REVIEW PERFORMANCE REPORTS	()	()	()	()	()	()	()	()	()	()	()
A - 33	COUNSEL PERSONNEL ON PROFESSIONAL STANDARDS	()	()	()	()	()	()	()	()	()	()	()
A - 34	DEFINE AREAS OF NURSING SERVICE RESPONSIBILITY	()	()	()	()	()	()	()	()	()	()	()
A - 35	DESIGN, MODIFY OR BUILD THERAPY-RELATED EQUIPMENT	()	()	()	()	()	()	()	()	()	()	()
A - 36	DESIGN ORGANIZATIONAL CHARTS	()	()	()	()	()	()	()	()	()	()	()
A - 37	DETERMINE OR EVALUATE SUPPLY OR EQUIPMENT REQUIREMENTS AT WARD OR SECTION LEVEL	()	()	()	()	()	()	()	()	()	()	()
A - 38	DETERMINE PERSONNEL REQUIREMENTS	()	()	()	()	()	()	()	()	()	()	()

INVOLVEMENT
a = Assist
b = Do
c = Do/Supervise
d = Supervise

TIME SPENT SCALE
1 = Very Much Below Average
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4 = Average
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6 = Above Average
7 = Very Much Above Average

		INVOLVEMENT a b c d	TIME SPENT SCALE 1 2 3 4 5 6 7
A - 39	DETERMINE THE KIND AND AMOUNT OF NURSING SERVICE REQUIRED TO GIVE QUALITY PATIENT CARE	( ) ( ) ( ) ( )	( ) ( ) ( ) ( ) ( ) ( ) ( )
A - 40	DETERMINE WORK PRIORITIES	( ) ( ) ( ) ( )	( ) ( ) ( ) ( ) ( ) ( ) ( )
A - 41	DEVELOP NURSE STAFFING PLANS	( ) ( ) ( ) ( )	( ) ( ) ( ) ( ) ( ) ( ) ( )
A - 42	DEVELOP OR IMPROVE WORK METHODS OR PROCEDURES	( ) ( ) ( ) ( )	( ) ( ) ( ) ( ) ( ) ( ) ( )
A - 43	DEVELOP OR MAINTAIN A PLAN FOR NURSES TO EVALUATE THE CARE GIVEN TO PATIENTS	( ) ( ) ( ) ( )	( ) ( ) ( ) ( ) ( ) ( ) ( )
A - 44	DEVELOP OR MAINTAIN A PLAN FOR PATIENTS TO EVALUATE THE CARE THEY RECEIVE	( ) ( ) ( ) ( )	( ) ( ) ( ) ( ) ( ) ( ) ( )
A - 45	DIRECT THE UTILIZATION OF EQUIPMENT AND SUPPLIES	( ) ( ) ( ) ( )	( ) ( ) ( ) ( ) ( ) ( ) ( )
A - 46	DIRECT THE ASSIGNMENT OF VOLUNTEER AUXILIARY PERSONNEL	( ) ( ) ( ) ( )	( ) ( ) ( ) ( ) ( ) ( ) ( )
A - 47	DISPOSE OF CONTAMINATED MATERIALS	( ) ( ) ( ) ( )	( ) ( ) ( ) ( ) ( ) ( ) ( )
A - 48	DISTRIBUTE ADMINISTRATIVE COMMUNICATIONS	( ) ( ) ( ) ( )	( ) ( ) ( ) ( ) ( ) ( ) ( )
A - 49	DRAFT BUDGET ESTIMATES	( ) ( ) ( ) ( )	( ) ( ) ( ) ( ) ( ) ( ) ( )
A - 50	DRAFT OR REVISE JOB DESCRIPTIONS	( ) ( ) ( ) ( )	( ) ( ) ( ) ( ) ( ) ( ) ( )
A - 51	DRAFT RECOMMENDATIONS FOR REVISIONS OF PUBLICATIONS	( ) ( ) ( ) ( )	( ) ( ) ( ) ( ) ( ) ( ) ( )
A - 52	ESTABLISH AND ENFORCE NURSE UNIFORM STANDARDS	( ) ( ) ( ) ( )	( ) ( ) ( ) ( ) ( ) ( ) ( )
A - 53	ESTABLISH VACATION AND TIME-OFF POLICY	( ) ( ) ( ) ( )	( ) ( ) ( ) ( ) ( ) ( ) ( )
A - 54	PREPARE OR PROCESS VACATION OR TIME-OFF APPLICATIONS	( ) ( ) ( ) ( )	( ) ( ) ( ) ( ) ( ) ( ) ( )
A - 55	SCHEDULE AND COORDINATE VACATIONS AND TIME-OFF	( ) ( ) ( ) ( )	( ) ( ) ( ) ( ) ( ) ( ) ( )
A - 56	ESTABLISH OR MONITOR PUBLIC RELATIONS ACTIVITIES	( ) ( ) ( ) ( )	( ) ( ) ( ) ( ) ( ) ( ) ( )
A - 57	ESTABLISH NURSING SERVICE COMMITTEES	( ) ( ) ( ) ( )	( ) ( ) ( ) ( ) ( ) ( ) ( )
A - 58	EVALUATE PROGRESS TOWARDS THE ATTAINMENT OF NURSING CARE OBJECTIVES	( ) ( ) ( ) ( )	( ) ( ) ( ) ( ) ( ) ( ) ( )
A - 59	EVALUATE SKILL LEVEL ASSIGNED NURSING PERSONNAL	( ) ( ) ( ) ( )	( ) ( ) ( ) ( ) ( ) ( ) ( )
A - 60	EVALUATE THE PREPARATION OF NURSING RECORDS OR REPORTS	( ) ( ) ( ) ( )	( ) ( ) ( ) ( ) ( ) ( ) ( )
A - 61	EVALUATE THE QUALITY OF PATIENT CARE	( ) ( ) ( ) ( )	( ) ( ) ( ) ( ) ( ) ( ) ( )
A - 62	EVALUATE THE UTILIZATION OF WORK AREAS OR SPACE	( ) ( ) ( ) ( )	( ) ( ) ( ) ( ) ( ) ( ) ( )
A - 63	EVALUATE TIME SCHEDULES FOR WARD COVERAGE	( ) ( ) ( ) ( )	( ) ( ) ( ) ( ) ( ) ( ) ( )
A - 64	PLAN OR SCHEDULE WORK ASSIGNMENTS FOR PERSONNEL	( ) ( ) ( ) ( )	( ) ( ) ( ) ( ) ( ) ( ) ( )
A - 65	PREPARE TIME CARDS	( ) ( ) ( ) ( )	( ) ( ) ( ) ( ) ( ) ( ) ( )
A - 66	PREPARE TIME SCHEDULES FOR PERSONNEL	( ) ( ) ( ) ( )	( ) ( ) ( ) ( ) ( ) ( ) ( )
A - 67	EVALUATE UTILIZATION OR NURSING/MEDICAL SERVICE PERSONNEL	( ) ( ) ( ) ( )	( ) ( ) ( ) ( ) ( ) ( ) ( )
A - 68	FOLD OR COUNT LINEN	( ) ( ) ( ) ( )	( ) ( ) ( ) ( ) ( ) ( ) ( )
A - 69	FORMULATE LOCAL HOSPITAL OR NURSING INSTRUCTIONS	( ) ( ) ( ) ( )	( ) ( ) ( ) ( ) ( ) ( ) ( )
A - 70	FORMULATE NURSING SERVICE PERSONNEL UTILIZATION POLICIES	( ) ( ) ( ) ( )	( ) ( ) ( ) ( ) ( ) ( ) ( )
A - 71	GUIDE SUBORDINATES IN MAINTAINING FAVORABLE INTERPERSONAL RELATIONSHIPS WITH OTHER HEALTH TEAM MEMBERS	( ) ( ) ( ) ( )	( ) ( ) ( ) ( ) ( ) ( ) ( )
A - 72	GIVE OR RECEIVE NURSING CHANGE-OF-SHIFT-REPORTS	( ) ( ) ( ) ( )	( ) ( ) ( ) ( ) ( ) ( ) ( )
A - 73	GUIDE SUBORDINATES IN MAINTAINING FAVORABLE INTERPERSONAL RELATIONSHIPS WITH PATIENTS	( ) ( ) ( ) ( )	( ) ( ) ( ) ( ) ( ) ( ) ( )
A - 74	IDENTIFY AND RESOLVE BED-CENSUS PROBLEMS	( ) ( ) ( ) ( )	( ) ( ) ( ) ( ) ( ) ( ) ( )
A - 75	INITIATE DISCIPLINARY OR CORRECTIVE PERSONNEL PROCEDURES	( ) ( ) ( ) ( )	( ) ( ) ( ) ( ) ( ) ( ) ( )
A - 76	INITIATE REFERRAL FOR THIRD-PARTY LIABILITY	( ) ( ) ( ) ( )	( ) ( ) ( ) ( ) ( ) ( ) ( )

INVOLVEMENT
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TIME SPENT SCALE
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		INVOLVEMENT a	b	c	d	TIME SPENT SCALE 1	2	3	4	5	6	7
A - 77	INITIATE REQUESTS FOR DRUGS FROM PHARMACY	()	()	()	()	()	()	()	()	()	()	()
A - 78	INITIATE REQUEST FOR PERSONNEL REPLACEMENTS	()	()	()	()	()	()	()	()	()	()	()
A - 79	INITIATE REQUESTS FOR PURCHASE OF EQUIPMENT	()	()	()	()	()	()	()	()	()	()	()
A - 80	INITIATE REQUEST FOR REPAIR/MAINTENANCE OF EQUIPMENT	()	()	()	()	()	()	()	()	()	()	()
A - 81	INITIATE REQUEST TO CENTRAL SUPPLY	()	()	()	()	()	()	()	()	()	()	()
A - 82	INSPECT AND EVALUATE ADHERENCE TO STANDARDS OF SANITATION, CLEANLINESS OR SAFETY	()	()	()	()	()	()	()	()	()	()	()
A - 83	INTERPRET ADMINISTRATIVE POLICIES OR PROCEDURES TO PATIENTS, VISITORS OR NURSING SERVICE PERSONNEL	()	()	()	()	()	()	()	()	()	()	()
A - 84	INTERPRET ELECTROCARDIOGRAPH TRACINGS	()	()	()	()	()	()	()	()	()	()	()
A - 85	INTERPRET NURSING PHILOSOPHY, AIMS OR PROGRAMS TO NURSING SERVICE PERSONNEL	()	()	()	()	()	()	()	()	()	()	()
A - 86	INTERPRET PROFESSIONAL POLICIES OR PROCEDURES TO PATIENTS, VISITORS, OR NURSING SERVICE PERSONNEL	()	()	()	()	()	()	()	()	()	()	()
A - 87	INTERPRET THE ROLE OF NURSING SERVICE TO OTHER DEPARTMENTS OR SERVICES	()	()	()	()	()	()	()	()	()	()	()
A - 88	INTERVIEW JOB APPLICANTS	()	()	()	()	()	()	()	()	()	()	()
A - 89	INTERVIEW SALESMEN	()	()	()	()	()	()	()	()	()	()	()
A - 90	INVENTORY EQUIPMENT	()	()	()	()	()	()	()	()	()	()	()
A - 91	INVENTORY SUPPLIES	()	()	()	()	()	()	()	()	()	()	()
A - 92	LABEL SPECIMENS AND FILL OUT LABORATORY SPECIMEN REQUEST FORMS	()	()	()	()	()	()	()	()	()	()	()
A - 93	MAKE UP DISASTER CASUALTY CONTROL KITS	()	()	()	()	()	()	()	()	()	()	()
A - 94	MAINTAIN UNIT ALCOHOL AND NARCOTIC RECORD	()	()	()	()	()	()	()	()	()	()	()
A - 95	MAINTAIN A UNIT, WARD OR SECTION LIBRARY	()	()	()	()	()	()	()	()	()	()	()
A - 96	MAINTAIN BULLETINS, MANUALS OR PUBLICATIONS	()	()	()	()	()	()	()	()	()	()	()
A - 97	MAINTAIN FILE OF LABORATORY, X-RAY OR CONSULTATION REPORTS	()	()	()	()	()	()	()	()	()	()	()
A - 98	MAINTAIN LIAISON WITH OUTSIDE AGENCIES ON NURSING MATTERS	()	()	()	()	()	()	()	()	()	()	()
A - 99	MAINTAIN PREVENTIVE MEDICINE REPORTS	()	()	()	()	()	()	()	()	()	()	()
A - 100	MAINTAIN PROFESSIONAL ACTIVITY REPORTS	()	()	()	()	()	()	()	()	()	()	()
A - 101	MAINTAIN WARD OR SECTION SUPPLY OR EQUIPMENT LEVELS	()	()	()	()	()	()	()	()	()	()	()
A - 102	MAKE ENTRIES IN CARDEXES	()	()	()	()	()	()	()	()	()	()	()
A - 103	MAKE POSTOPERATIVE OR RECOVERY BEDS	()	()	()	()	()	()	()	()	()	()	()
A - 104	MAKE RECOMMENDATIONS ABOUT HOSPITAL CONSTRUCTION PLANS	()	()	()	()	()	()	()	()	()	()	()
A - 105	MAKE REPAIRS TO PATIENT CARE UNIT OR TREATMENT FACILITY	()	()	()	()	()	()	()	()	()	()	()
A - 106	MEET WITH HEALTH TEAM MEMBERS OTHER THAN NURSES TO PLAN FOR TOTAL PATIENT CARE	()	()	()	()	()	()	()	()	()	()	()
A - 107	MIX ALLERGY EXTRACTS	()	()	()	()	()	()	()	()	()	()	()
A - 108	OBTAIN BLOOD FROM BLOOD BANK	()	()	()	()	()	()	()	()	()	()	()
A - 109	ORGANIZE ENTERTAINMENT OR SOCIAL EVENTS	()	()	()	()	()	()	()	()	()	()	()
A - 110	ORGANIZE OR RESTOCK INTRAVENOUS CART OR TRAY	()	()	()	()	()	()	()	()	()	()	()
A - 111	ORIENT VISITORS TO WARD	()	()	()	()	()	()	()	()	()	()	()
A - 112	PARTICIPATE AS A MEMBER OR NURSING SERVICE OR STANDING HOSPITAL COMMITTEES	()	()	()	()	()	()	()	()	()	()	()
A - 113	PARTICIPATE IN ACTIVITIES OF PROFESSIONAL NURSING ORGANIZATIONS	()	()	()	()	()	()	()	()	()	()	()
A - 114	PARTICIPATE IN COLLECTIVE BARGAINING WITH UNION REPRESENTATIVES	()	()	()	()	()	()	()	()	()	()	()

INVOLVEMENT
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TIME SPENT SCALE
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		INVOLVEMENT a	b	c	d	TIME SPENT SCALE 1	2	3	4	5	6	7
A - 115	PARTICIPATE IN PROFESSIONAL WORKSHOPS OR CONFERENCES	()	()	()	()	()	()	()	()	()	()	()
A - 116	PARTICIPATE IN TEAM CONFERENCES	()	()	()	()	()	()	()	()	()	()	()
A - 117	PARTICIPATE IN STAFF MEETINGS	()	()	()	()	()	()	()	()	()	()	()
A - 118	PERFORM ADMINISTRATIVE-CALL DUTIES	()	()	()	()	()	()	()	()	()	()	()
A - 119	PERFORM DRUG INVENTORY	()	()	()	()	()	()	()	()	()	()	()
A - 120	PERFORM GENERAL HOUSEKEEPING DUTIES	()	()	()	()	()	()	()	()	()	()	()
A - 121	PERFORM PATIENT ADMISSION, TRANSFER OR DISPOSITION PROCEDURES	()	()	()	()	()	()	()	()	()	()	()
A - 122	PERFORM ROUTINE HEMATOLOGY	()	()	()	()	()	()	()	()	()	()	()
A - 123	PERFORM PATIENT-NURSING-RECORDS AUDIT	()	()	()	()	()	()	()	()	()	()	()
A - 124	PERFORM STAFF OR LIAISON VISITS	()	()	()	()	()	()	()	()	()	()	()
A - 125	PERFORM TERMINAL DISINFECTION PROCEDURES	()	()	()	()	()	()	()	()	()	()	()
A - 126	PLAN CAREER DEVELOPMENT ASSIGNMENTS FOR PERSONNEL	()	()	()	()	()	()	()	()	()	()	()
A - 127	PLAN OR COORDINATE LAUNDRY CONTROL MEASURES	()	()	()	()	()	()	()	()	()	()	()
A - 128	PLAN THE PHYSICAL LAYOUT OF MEDICAL SERVICE FACILITIES	()	()	()	()	()	()	()	()	()	()	()
A - 129	PLAN REPLACEMENT AND MODERNIZATION PROGRAM FOR SUPPLIES AND EQUIPMENT	()	()	()	()	()	()	()	()	()	()	()
A - 130	PLAN STATUS BOARDS OR CHARTS	()	()	()	()	()	()	()	()	()	()	()
A - 131	PREPARE AND PRESENT SPEECHES AND ADDRESSES	()	()	()	()	()	()	()	()	()	()	()
A - 132	PREPARE AND MAINTAIN NURSING CARE PLANS	()	()	()	()	()	()	()	()	()	()	()
A - 133	PREPARE CONSULTATION REQUESTS OR LABORATORY SLIPS	()	()	()	()	()	()	()	()	()	()	()
A - 134	PREPARE DRESSING TRAYS	()	()	()	()	()	()	()	()	()	()	()
A - 135	PREPARE NURSING ACTIVITY REPORTS	()	()	()	()	()	()	()	()	()	()	()
A - 136	PREPARE OR GIVE NURSING REPORTS ON BED CENSUS, SI, VIPS, OR SPECIAL INTEREST PATIENTS	()	()	()	()	()	()	()	()	()	()	()
A - 137	PREPARE INPATIENTS I.D. BANDS (OTHER THAN INFANTS)	()	()	()	()	()	()	()	()	()	()	()
A - 138	PREPARE OR MAINTAIN INPATIENTS RECORDS	()	()	()	()	()	()	()	()	()	()	()
A - 139	PREPARE OR MAINTAIN OUTPATIENTS RECORDS	()	()	()	()	()	()	()	()	()	()	()
A - 140	PREPARE NURSING-RELATED STAFF STUDIES	()	()	()	()	()	()	()	()	()	()	()
A - 141	PREPARE OFFICIAL CORRESPONDENCE	()	()	()	()	()	()	()	()	()	()	()
A - 142	PREPARE OR SUBMIT REPORTS OF TREATMENT	()	()	()	()	()	()	()	()	()	()	()
A - 143	PREPARE RECOMMENDATIONS FOR SPECIAL AWARDS	()	()	()	()	()	()	()	()	()	()	()
A - 144	PREPARE RECOMMENDATIONS FOR SPECIAL CORRECTIVE ACTION IN CASE OF RECURRING PROBLEMS	()	()	()	()	()	()	()	()	()	()	()
A - 145	PREPARE SPECIAL INCIDENT REPORTS	()	()	()	()	()	()	()	()	()	()	()
A - 146	PREPARE TECHNICAL REPORTS OR PROFESSIONAL PAPERS	()	()	()	()	()	()	()	()	()	()	()
A - 147	PREPARE UNIT RECORDS, GRAPHS, REPORTS, OR STUDIES	()	()	()	()	()	()	()	()	()	()	()
A - 148	PRESCRIBE MEDICATIONS	()	()	()	()	()	()	()	()	()	()	()
A - 149	PROVIDE ORIENTATION TO NEWLY ASSIGNED PERSONNEL	()	()	()	()	()	()	()	()	()	()	()
A - 150	READ PROFESSIONAL NURSING JOURNAL AND PUBLICATIONS	()	()	()	()	()	()	()	()	()	()	()
A - 151	RECOPY PHYSICIANS ORDERS	()	()	()	()	()	()	()	()	()	()	()
A - 152	REQUISITION LAUNDRY SUPPLIES OR LINEN	()	()	()	()	()	()	()	()	()	()	()

INVOLVEMENT
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TIME SPENT SCALE
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		INVOLVEMENT a	b	c	d	TIME SPENT SCALE 1	2	3	4	5	6	7
A - 153	RESOLVE EMERGENCY STAFFING PROBLEMS	()	()	()	()	()	()	()	()	()	()	()
A - 154	REVIEW STAFF MANNING DOCUMENTS AND SUBMIT RECOMMENDATIONS FOR CHANGE	()	()	()	()	()	()	()	()	()	()	()
A - 155	REVIEW SUGGESTIONS AND FORWARD FOR CONSIDERATION	()	()	()	()	()	()	()	()	()	()	()
A - 156	SCHEDULE DIAGNOSTIC TESTS, CONSULTATIONS OR SPECIAL PROCEDURES WITH APPROPRIATE DEPARTMENTS	()	()	()	()	()	()	()	()	()	()	()
A - 157	SCREEN SOLICITATIONS OR ADVERTISING MATERIALS	()	()	()	()	()	()	()	()	()	()	()
A - 158	SERVE AS A MEMBER OF INFECTION CONTROL COMMITTEES	()	()	()	()	()	()	()	()	()	()	()
A - 159	SERVE AS A MEMBER OF CARDIOPULMONARY RESUSCITATION TEAM	()	()	()	()	()	()	()	()	()	()	()
A - 160	SERVE AS A MEMBER OF NURSING AUDIT COMMITTEE	()	()	()	()	()	()	()	()	()	()	()
A - 161	SET UP EQUIPMENT FOR USE IN CARDIAC EMERGENCIES	()	()	()	()	()	()	()	()	()	()	()
A - 162	SET UP UNDERWATER SEALED DRAINAGE	()	()	()	()	()	()	()	()	()	()	()
A - 163	SET UP OR USE OXYGEN EQUIPMENT	()	()	()	()	()	()	()	()	()	()	()
A - 164	SET UP ISOLATION UNITS	()	()	()	()	()	()	()	()	()	()	()
A - 165	SET UP INTRAVENOUS INFUSION FOR ADMINISTRATION	()	()	()	()	()	()	()	()	()	()	()
A - 166	SET UP INSTRUMENTS FOR MINOR SURGERY	()	()	()	()	()	()	()	()	()	()	()
A - 167	SOLICIT VOLUNTEERS FOR HOSPITAL OR CLINIC WORK	()	()	()	()	()	()	()	()	()	()	()
A - 168	SUPERVISE ADMINISTRATIVE OR CLERICAL SUPPORT PERSONNEL	()	()	()	()	()	()	()	()	()	()	()
A - 169	SUPERVISE COLUNTEER AUXILIARY NURSING PERSONNEL	()	()	()	()	()	()	()	()	()	()	()
A - 170	SUPERVISE NURSES	()	()	()	()	()	()	()	()	()	()	()
A - 171	SUPERVISE THE DISASTER CONTROL PROGRAM FOR THE FACILITY	()	()	()	()	()	()	()	()	()	()	()
A - 172	TRAIN NON-MEDICAL PERSONNEL IN EMERGENCY FIRST AID PROCEDURES	()	()	()	()	()	()	()	()	()	()	()
A - 173	WITNESS, PATIENT, PARENT OR GUARDIAN SIGNATURES ON LEGAL DOCUMENTS SUCH AS OPERATIVE PERMITS	()	()	()	()	()	()	()	()	()	()	()
A - 174	WORK WITH LOCAL HEALTH AGENCIES IN PREVENTIVE MEDICINE PROGRAMS	()	()	()	()	()	()	()	()	()	()	()
A - 175	WRITE OR REVISE NURSING PHILOSOPHY OR OBJECTIVES	()	()	()	()	()	()	()	()	()	()	()
A - 176	WRITE PRESCRIPTIONS FOR PHYSICIANS SIGNATURE	()	()	()	()	()	()	()	()	()	()	()
A - 177	DISPENSE DRUGS FROM PHARMACY	()	()	()	()	()	()	()	()	()	()	()
A - 178	OBTAIN DRUGS FROM PHARMACY	()	()	()	()	()	()	()	()	()	()	()
A - 179	SERVE AS COURIER	()	()	()	()	()	()	()	()	()	()	()
A - 180	PRONOUNCE THE PATIENT DEAD	()	()	()	()	()	()	()	()	()	()	()
		()	()	()	()	()	()	()	()	()	()	()
		()	()	()	()	()	()	()	()	()	()	()
		()	()	()	()	()	()	()	()	()	()	()
		()	()	()	()	()	()	()	()	()	()	()
		()	()	()	()	()	()	()	()	()	()	()
		()	()	()	()	()	()	()	()	()	()	()
		()	()	()	()	()	()	()	()	()	()	()
		()	()	()	()	()	()	()	()	()	()	()

INVOLVEMENT
a = Assist
b = Do
c = Do/Supervise
d = Supervise

TIME SPENT SCALE
1 = Very Much Below Average
2 = Below Average
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		INVOLVEMENT a	b	c	d	TIME SPENT SCALE 1	2	3	4	5	6	7
B - 1	ACCOMPANY PATIENTS ON OUTSIDE ACTIVITIES SUCH AS EDUCATIONAL TOURS OR ENTERTAINMENT EVENTS	()	()	()	()	()	()	()	()	()	()	()
B - 2	ACT AS A CONSULTANT TO MEMBERS OF OTHER NURSING SPECIALTIES	()	()	()	()	()	()	()	()	()	()	()
B - 3	ADD MEDICATIONS TO INTRAVENOUS INFUSIONS	()	()	()	()	()	()	()	()	()	()	()
B - 4	ADMINISTER BED PANS OR URINALS	()	()	()	()	()	()	()	()	()	()	()
B - 5	ASSIST WITH BLOOD TRANSFUSIONS	()	()	()	()	()	()	()	()	()	()	()
B - 6	ADMINISTER BLADDER IRRIGATIONS	()	()	()	()	()	()	()	()	()	()	()
B - 7	ADMINISTER COLOSTOMY IRRIGATIONS	()	()	()	()	()	()	()	()	()	()	()
B - 8	ADMINISTER COMPLETE BED BATHS	()	()	()	()	()	()	()	()	()	()	()
B - 9	ADMINISTER EAR DROPS	()	()	()	()	()	()	()	()	()	()	()
B - 10	ADMINISTER EAR IRRIGATIONS	()	()	()	()	()	()	()	()	()	()	()
B - 11	ADMINISTER ENEMAS	()	()	()	()	()	()	()	()	()	()	()
B - 12	ADMINISTER EYE DROPS	()	()	()	()	()	()	()	()	()	()	()
B - 13	ADMINISTER EYE IRRIGATIONS	()	()	()	()	()	()	()	()	()	()	()
B - 14	ADMINISTER FIRST AID	()	()	()	()	()	()	()	()	()	()	()
B - 15	ADMINISTER GASTRIC IRRIGATIONS	()	()	()	()	()	()	()	()	()	()	()
B - 16	ADMINISTER INHALATION MEDICATIONS	()	()	()	()	()	()	()	()	()	()	()
B - 17	ADMINISTER INTRADERMAL MEDICATIONS	()	()	()	()	()	()	()	()	()	()	()
B - 18	ADMINISTER INTRAMUSCULAR MEDICATIONS	()	()	()	()	()	()	()	()	()	()	()
B - 19	ADMINISTER INTRAVENOUS INFUSIONS	()	()	()	()	()	()	()	()	()	()	()
B - 20	ADMINISTER INTRAVENOUS MEDICATIONS	()	()	()	()	()	()	()	()	()	()	()
B - 21	ADMINISTER IPPB (INTERMITTANT POSITIVE PRESSURE BREATHING)	()	()	()	()	()	()	()	()	()	()	()
B - 22	ADMINISTER MEDICATIONS RECTALLY	()	()	()	()	()	()	()	()	()	()	()
B - 23	ADMINISTER MEDICATIONS VAGINALLY	()	()	()	()	()	()	()	()	()	()	()
B - 24	ADMINISTER NARCOTICS	()	()	()	()	()	()	()	()	()	()	()
B - 25	ADMINISTER NASAL IRRIGATIONS	()	()	()	()	()	()	()	()	()	()	()
B - 26	ADMINISTER NOSE DROPS	()	()	()	()	()	()	()	()	()	()	()
B - 27	ADMINISTER ORAL MEDICATIONS	()	()	()	()	()	()	()	()	()	()	()
B - 28	ADMINISTER PARTIAL BED BATHS	()	()	()	()	()	()	()	()	()	()	()
B - 29	ADMINISTER SUBCUTANEOUS MEDICATIONS	()	()	()	()	()	()	()	()	()	()	()
B - 30	ADMINISTER SUBLINGUAL MEDICATIONS	()	()	()	()	()	()	()	()	()	()	()
B - 31	ADMINISTER THROAT IRRIGATIONS	()	()	()	()	()	()	()	()	()	()	()
B - 32	ADMINISTER SKIN TESTS	()	()	()	()	()	()	()	()	()	()	()
B - 33	ADMINISTER TOPICAL IRRIGATIONS	()	()	()	()	()	()	()	()	()	()	()
B - 34	ADMINISTER VAGINAL IRRIGATIONS	()	()	()	()	()	()	()	()	()	()	()
B - 35	ADMINISTER WOUND IRRIGATIONS	()	()	()	()	()	()	()	()	()	()	()
B - 36	AMBULATE PATIENTS	()	()	()	()	()	()	()	()	()	()	()
B - 37	APPLY ABDOMINAL, BREAST OR T-BINDER	()	()	()	()	()	()	()	()	()	()	()
B - 38	APPLY BANDAGES	()	()	()	()	()	()	()	()	()	()	()

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	INVOLVEMENT a	b	c	d	TIME SPENT SCALE 1	2	3	4	5	6	7
B - 39 APPLY BUCK EXTENSION	()	()	()	()	()	()	()	()	()	()	()
B - 40 APPLY CASTS TO THE EXTREMITIES	()	()	()	()	()	()	()	()	()	()	()
B - 41 APPLY CAST TO THE TRUNK OR PELVIC AREA SUCH AS SPIKA OR BODY CASTS	()	()	()	()	()	()	()	()	()	()	()
B - 42 APPLY CERVICAL TRACTION	()	()	()	()	()	()	()	()	()	()	()
B - 43 APPLY COLD BY ALCOHOL SPONGE	()	()	()	()	()	()	()	()	()	()	()
B - 44 APPLY COLD BY ICE CAP OR COMPRESSES	()	()	()	()	()	()	()	()	()	()	()
B - 45 APPLY COLD BY TUB BATH	()	()	()	()	()	()	()	()	()	()	()
B - 46 APPLY HEAT BY CRADLE, HOT WATER BOTTLE OR COMPRESSES	()	()	()	()	()	()	()	()	()	()	()
B - 47 APPLY HEAT BY ELECTRICAL HEATING PAD OR THERMAL BLANKET	()	()	()	()	()	()	()	()	()	()	()
B - 48 APPLY HEAT BY K-PAD OR CHEMICAL HEATING PAD	()	()	()	()	()	()	()	()	()	()	()
B - 49 APPLY HYPOTHERMIA BLANKET	()	()	()	()	()	()	()	()	()	()	()
B - 50 APPLY MECHANICAL RESTRAINTS TO PATIENTS	()	()	()	()	()	()	()	()	()	()	()
B- 51 APPLY ORTHOPEDIC BRACES	()	()	()	()	()	()	()	()	()	()	()
B - 52 APPLY PACEMAKERS TO PATIENTS	()	()	()	()	()	()	()	()	()	()	()
B - 53 APPLY SPLINTS	()	()	()	()	()	()	()	()	()	()	()
B - 54 ASSESS CHILD MAIFESTING SIGNS OF CHILD ABUSE	()	()	()	()	()	()	()	()	()	()	()
B - 55 ASSIST PATIENTS IN PLACING TELEPHONE CALLS	()	()	()	()	()	()	()	()	()	()	()
B - 56 ASSIST IN OBTAINING PAP (PAPANICOLAOU) SMEAR	()	()	()	()	()	()	()	()	()	()	()
B - 57 ASSIST IN PERFORMING PROCTOSCOPY	()	()	()	()	()	()	()	()	()	()	()
B - 58 ASSIST PATIENT WITH POSTURAL DRAINAGE	()	()	()	()	()	()	()	()	()	()	()
B - 59 ASSIST PATIENTS TO TURN, COUGH AND DEEP BREATHE	()	()	()	()	()	()	()	()	()	()	()
B - 60 ASSIST PHYSICIAN IN MAKING DIFFERENTIAL DIAGNOSIS	()	()	()	()	()	()	()	()	()	()	()
B - 61 ASSIST WITH BIOPSIES	()	()	()	()	()	()	()	()	()	()	()
B - 62 ASSIST WITH CUTDOWNS	()	()	()	()	()	()	()	()	()	()	()
B - 63 ASSIST WITH INSERTATION OF CHEST TUBES	()	()	()	()	()	()	()	()	()	()	()
B - 64 ASSIST WITH SPINAL PUNCTURE	()	()	()	()	()	()	()	()	()	()	()
B - 65 ASSIST WITH STERNAL PUNCTURE	()	()	()	()	()	()	()	()	()	()	()
B - 66 ASSIST WITH THORACENTESIS OR PARACENTESIS	()	()	()	()	()	()	()	()	()	()	()
B - 67 ASSIST WITH VARINAL EXAMINATIONS	()	()	()	()	()	()	()	()	()	()	()
B - 68 ATTACH OR ANCHOR DRAINAGE OR ADMINISTRATION TUBING	()	()	()	()	()	()	()	()	()	()	()
B - 69 PLAN AND ATTACH EMERGENCY SICK, WOUNDED OR DEATH TAGS	()	()	()	()	()	()	()	()	()	()	()
B - 70 BIVALVE OR WINDOW CASTS	()	()	()	()	()	()	()	()	()	()	()
B - 71 BRIEF FAMILY ON CONDITION OF PATIENTS	()	()	()	()	()	()	()	()	()	()	()
B - 72 CALL MINISTER, RABBI OR PRIEST FOR PATIENT OR FAMILY	()	()	()	()	()	()	()	()	()	()	()
B - 73 CARE FOR PATIENTS ON TURING FRAMES OR CIRCLE ELECTRIC BEDS	()	()	()	()	()	()	()	()	()	()	()
B - 74 CATHERIZE PATIENTS	()	()	()	()	()	()	()	()	()	()	()
B - 75 CHANGE DRESSINGS	()	()	()	()	()	()	()	()	()	()	()
B - 76 CHECK OFF COMPLETED PATIENT CARE IN CARDEX TO INSURE COMPLIANCE WITH PHYSICIANS ORDERS	()	()	()	()	()	()	()	()	()	()	()

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		INVOLVEMENT a	b	c	d	TIME SPENT SCALE 1	2	3	4	5	6	7
B - 77	COLLECT AND LABEL SPECIMENS SUCH AS URINE, FECES OR SPUTUM FROM PATIENTS	()	()	()	()	()	()	()	()	()	()	()
B - 78	COLLECT FOOD TRAYS OR SERVING UNITS	()	()	()	()	()	()	()	()	()	()	()
B - 79	COORDINATE PATINET CARE WITH WARD NURSE	()	()	()	()	()	()	()	()	()	()	()
B - 80	COORDINATE WITH PHYSICIAN REGARDING PATIENT CARE	()	()	()	()	()	()	()	()	()	()	()
B - 81	COUNSEL AND INSTRUCT IN POST OPERATIVE TONSILLECTOMY REGIMEN	()	()	()	()	()	()	()	()	()	()	()
B - 82	COUNSEL PATIENTS ON MATTERS SUCH AS TREATMENT, HOSPITAL DISCHARGE OR PERSONAL PROBLEMS	()	()	()	()	()	()	()	()	()	()	()
B - 83	DEBRIDE WOUNDS	()	()	()	()	()	()	()	()	()	()	()
B - 84	DEFIBRILLATE PATIENTS	()	()	()	()	()	()	()	()	()	()	()
B - 85	DELIVER BABY IN ABSENCE OF PHYSICIAN	()	()	()	()	()	()	()	()	()	()	()
B - 86	DRAPE PATIENT FOR SURGICAL PROCEDURE	()	()	()	()	()	()	()	()	()	()	()
B - 87	DIAGNOSE PATIENT ILLNESS	()	()	()	()	()	()	()	()	()	()	()
B - 88	DIRECT THE ADMINISTRATION OF DRUGS	()	()	()	()	()	()	()	()	()	()	()
B - 89	DRAW BLOOD FOR LABORATORY TESTS	()	()	()	()	()	()	()	()	()	()	()
B - 90	ESCORT PATIENTS ON AMBULANCE RUNS	()	()	()	()	()	()	()	()	()	()	()
B - 91	EVALUATE SYMPTOMS OF PATIENTS MINOR DISCOMFORT COMPLAINTS	()	()	()	()	()	()	()	()	()	()	()
B - 92	EXAMINE FOR HERNIAS (INGUINAL, FEMORAL, OR VENTRAL)	()	()	()	()	()	()	()	()	()	()	()
B - 93	EXAMINE VERTEBRAL COLUMN FOR ABNORMAL DEVELOPMENT	()	()	()	()	()	()	()	()	()	()	()
B - 94	EXPLAIN AND APPLY SAFETY REGULATIONS IN PATIENT CARE	()	()	()	()	()	()	()	()	()	()	()
B - 95	EXPLAIN GENERAL SURGICAL PROCEDURES AND PROBABLE POST-OPERATIVE CONDITIONS TO PATIENTS	()	()	()	()	()	()	()	()	()	()	()
B - 96	FEED INCAPACITATED PATIENTS	()	()	()	()	()	()	()	()	()	()	()
B - 97	GIVE ARTIFICIAL RESPIRATION	()	()	()	()	()	()	()	()	()	()	()
B - 98	GIVE BACK RUBS	()	()	()	()	()	()	()	()	()	()	()
B - 99	GIVE COMPREHENSIVE SKIN CARE	()	()	()	()	()	()	()	()	()	()	()
B - 100	GIVE SPEECH DISCRIMINATION TEST USING OWN MODULATED VOICE	()	()	()	()	()	()	()	()	()	()	()
B - 101	IDENTIFY AND MANAGE BURNS	()	()	()	()	()	()	()	()	()	()	()
B - 102	IDENTIFY AND MANAGE COLD INJURIES	()	()	()	()	()	()	()	()	()	()	()
B - 103	IDENTIFY AND MANAGE FRACTURES OR DISLOCATIONS	()	()	()	()	()	()	()	()	()	()	()
B - 104	IDENTIFY AND MANAGE SUNSTROKE OR HEAT EXHAUSTION	()	()	()	()	()	()	()	()	()	()	()
B - 105	IDENTIFY OR CARE FOR POSTOPERATIVE HEMORRHAGE	()	()	()	()	()	()	()	()	()	()	()
B - 106	IDENTIFY PERSONAL OR EMOTIONAL PROBLEMS OR NEEDS OF PATIENTS	()	()	()	()	()	()	()	()	()	()	()
B - 107	IDENTIFY REHABILITATION PROBLEMS OR NEEDS OF PATIENTS	()	()	()	()	()	()	()	()	()	()	()
B - 108	INITIATE TREATMENT AS A RESULT OF INTERPRETING MONITORING DEVICES	()	()	()	()	()	()	()	()	()	()	()
B - 109	INSERT ARTERIAL CATHETERS	()	()	()	()	()	()	()	()	()	()	()
B - 110	INSERT INTRAVENOUS PLACEMENT UNITS, SUCH AS INTERCARTHS OR JELCO	()	()	()	()	()	()	()	()	()	()	()
B - 111	INSERT MASO-GASTRIC TUBES	()	()	()	()	()	()	()	()	()	()	()
B -112	INFORM PATIENTS AND RELATIVES OF COMMUNITY HEALTH RESOURCES	()	()	()	()	()	()	()	()	()	()	()
B - 113	INSERT ORAL AIRWAY	()	()	()	()	()	()	()	()	()	()	()
B - 114	INSTRUCT PATIENTS IN CRUTCH WALKING	()	()	()	()	()	()	()	()	()	()	()

INVOLVEMENT
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		INVOLVEMENT a	b	c	d	TIME SPENT SCALE 1	2	3	4	5	6	7
B - 115	INSTRUCT PATIENTS ON LIMITATIONS FOLLOWING SURGERY	()	()	()	()	()	()	()	()	()	()	()
B - 116	INTERPRET READINGS FROM ELECTRONIC MONITORING DEVICES SUCH AS CARDIAC MONITORS	()	()	()	()	()	()	()	()	()	()	()
B - 117	MAINTAIN OR DISCONTINUE BLOOD TRANSFUSIONS	()	()	()	()	()	()	()	()	()	()	()
B - 118	MAINTAIN OR REMOVE ORAL AIRWAYS	()	()	()	()	()	()	()	()	()	()	()
B - 119	MAKE BEDS OTHER THAN POSTOPERATIVE OR RECOVERY	()	()	()	()	()	()	()	()	()	()	()
B - 120	MAKE NURSING DIAGNOSIS	()	()	()	()	()	()	()	()	()	()	()
B - 121	MAKE PRE-OR POSTPARTAL VISITS TO EVALUATE CONDITIONS OF PATIENTS	()	()	()	()	()	()	()	()	()	()	()
B - 122	MAKE WARD ROUNDS ALONE	()	()	()	()	()	()	()	()	()	()	()
B - 123	MAKE WARD ROUNDS WITH WARD NURSES, SUPERVISOR OR CHIEF NURSE	()	()	()	()	()	()	()	()	()	()	()
B - 124	MAKE WARD ROUNDS WITH PHYSICIANS	()	()	()	()	()	()	()	()	()	()	()
B - 125	MANAGE EMERGENCY DENTAL PROBLEMS	()	()	()	()	()	()	()	()	()	()	()
B - 126	PERFORM PERITONEAL DIALYSIS	()	()	()	()	()	()	()	()	()	()	()
B - 127	MEASURE AND RECORD INTAKE AND OUTPUT	()	()	()	()	()	()	()	()	()	()	()
B - 128	MEET WITH NURSES TO PLAN FOR TOTAL PATIENT CARE	()	()	()	()	()	()	()	()	()	()	()
B - 129	MEDIATE INTERPERSONAL RELATIONSHIPS BETWEEN PATIENTS AND PHYSICIANS	()	()	()	()	()	()	()	()	()	()	()
B - 130	MONITOR HEART TONES OTHER THAN FETAL	()	()	()	()	()	()	()	()	()	()	()
B - 131	MONITOR INTRAVENOUS ADMINISTRATION	()	()	()	()	()	()	()	()	()	()	()
B - 132	NOTIFY PHYSICIANS OF PATIENTS ARRIVALS AND STATUS	()	()	()	()	()	()	()	()	()	()	()
B - 133	NOTIFY PHYSICIANS OF OUTDATED ORDERS	()	()	()	()	()	()	()	()	()	()	()
B - 134	OBTAIN MEDICAL HISTORY FROM PATIENT OR OTHER INFORMANT	()	()	()	()	()	()	()	()	()	()	()
B - 135	OBTAIN NURSING HISTORIES	()	()	()	()	()	()	()	()	()	()	()
B - 136	OBSERVE AND RECORD CONDITION OF PATIENTS	()	()	()	()	()	()	()	()	()	()	()
B - 137	OBSERVE AND REPORT CHANGES IN CONDITION OF PATIENTS	()	()	()	()	()	()	()	()	()	()	()
B - 138	OBTAIN PATIENT OR FAMILY CONSENT FOR TREATMENT	()	()	()	()	()	()	()	()	()	()	()
B - 139	ORIENT NEW PATIENTS TO HOSPITAL RULES AND FACILITIES	()	()	()	()	()	()	()	()	()	()	()
B - 140	ORDER OR COORDINATE PATIENT DIETS WITH FOOD SERVICE	()	()	()	()	()	()	()	()	()	()	()
B - 141	PARTICIPATE IN PATIENT RECREATIONAL ACTIVITIES IN WARD OR HOSPITAL SETTINGS	()	()	()	()	()	()	()	()	()	()	()
B - 142	PARTICIPATE IN STAFF MEETINGS ON PSYCHODYNAMICS OF PATIENT BEHAVIOR	()	()	()	()	()	()	()	()	()	()	()
B - 143	PERFORM ALLERGY TESTING	()	()	()	()	()	()	()	()	()	()	()
B - 144	PERFORM AS NURSING CONSULTANT	()	()	()	()	()	()	()	()	()	()	()
B - 145	PERFORM BEDSIDE NURSING AUDIT	()	()	()	()	()	()	()	()	()	()	()
B - 146	PERFORM CRICOTHYROIDOTOMY	()	()	()	()	()	()	()	()	()	()	()
B - 147	PERFORM ENDOTRACHEAL SUCTION	()	()	()	()	()	()	()	()	()	()	()
B - 148	PERFORM EXTERNAL CARDIAC MASSAGE	()	()	()	()	()	()	()	()	()	()	()
B - 149	PERFORM GASTRIC GAVAGE	()	()	()	()	()	()	()	()	()	()	()
B - 150	PERFORM GASTRIC LAVAGE	()	()	()	()	()	()	()	()	()	()	()
B - 151	PERFORM ISOLATION OR REVERSE ISOLATION TECHNIQUES	()	()	()	()	()	()	()	()	()	()	()
B - 152	PERFORM OCCUPATIONAL THERAPY PROCEDURES	()	()	()	()	()	()	()	()	()	()	()

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		INVOLVEMENT a b c d	TIME SPENT SCALE 1 2 3 4 5 6 7
B - 153	PERFORM ORAL HYGIENE	() () () ()	() () () () () () ()
B - 154	PERFORM POSTMORTEM CARE	() () () ()	() () () () () () ()
B - 155	PERFORM PHYSICAL EXAMINATIONS	() () () ()	() () () () () () ()
B - 156	PERFORM PHYSICAL THERAPY PROCEDURES	() () () ()	() () () () () () ()
B - 157	PERFORM RECTAL EXAMINATIONS	() () () ()	() () () () () () ()
B - 158	PERFORM ROUTINE URINALYSIS	() () () ()	() () () () () () ()
B - 159	PERFORM SURGICAL SKIN PREPS ON PATIENTS PRIOR TO OPERATIVE PROCEDURES	() () () ()	() () () () () () ()
B - 160	PERFORM TRACHEOSTOMY CARE	() () () ()	() () () () () () ()
B - 161	PERFORM TRIAGE IN A MEDICAL FACILITY	() () () ()	() () () () () () ()
B - 162	PERFORM URINE TEST FOR SUGAR, ACETONE OR ALBUMIN	() () () ()	() () () () () () ()
B - 163	PERFORM VARINAL EXAMINATIONS	() () () ()	() () () () () () ()
B - 164	PLAN PHYSICAL THERAPY REGIMEN FOR PATIENTS IN THE ABSENCE OF THERAPIST	() () () ()	() () () () () () ()
B - 165	PREPARE PATIENTS TO RECEIVE SACRAMENTS OR ASSIST IN THE ADMINISTRATION OF THE SACRAMENTS	() () () ()	() () () () () () ()
B - 166	PREPARE PATIENTS FOR PHYSICIANS EXAMINATION OR TREATMENT	() () () ()	() () () () () () ()
B - 167	PREPARE PATIENTS FOR SPECIAL DIAGNOSTIC OR TREATMENT PROCEDURES	() () () ()	() () () () () () ()
B - 168	PREPARE PATIENTS PSYCHOLOGICALLY TO COPE WITH THEIR ILLNESSES	() () () ()	() () () () () () ()
B - 169	PREPARE PRESCRIBED MEDICATIONS	() () () ()	() () () () () () ()
B - 170	PRESCRIBE TREATMENTS	() () () ()	() () () () () () ()
B - 171	PREVENT OR TREAT SHOCK	() () () ()	() () () () () () ()
B - 172	PROVIDE EMOTIONAL SUPPORT TO PATIENTS FAMILIES	() () () ()	() () () () () () ()
B - 173	READ AND RECORD CENTRAL VENOUS PRESSURE	() () () ()	() () () () () () ()
B - 174	RECEIVE AND DELIVER MAIL, MESSAGES OR PERSONAL ITEMS FOR PATIENTS	() () () ()	() () () () () () ()
B - 175	REFER PATIENTS TO OUTPATIENT CLINIC	() () () ()	() () () () () () ()
B - 176	REINFORCE DRESSINGS	() () () ()	() () () () () () ()
B - 177	REMOVE FECAL IMPACTIONS	() () () ()	() () () () () () ()
B - 178	REMOVE PLASTER CASTS	() () () ()	() () () () () () ()
B - 179	RESOLVE/REFER COMPLAINTS OF PATIENTS, VISITORS OR PERSONNEL	() () () ()	() () () () () () ()
B - 180	REVIEW OR INTERPRET LABORATORY REPORTS OR REPORT FINDINGS TO PHYSICIANS	() () () ()	() () () () () () ()
B - 181	ROLL SKIN GRAFTS	() () () ()	() () () () () () ()
B - 182	SCREEN BLOOD DONORS AND DRAW BLOOD FOR BLOOD BANK	() () () ()	() () () () () () ()
B - 183	SERVE AS A TEAM LEADER USING TEAM NURSING	() () () ()	() () () () () () ()
B - 184	SERVE AS A TEAM MEMBER USING TEAM NURSING	() () () ()	() () () () () () ()
B - 185	SERVE AS A CHAPERONE FOR MEDICAL EXAMINATION OR TREATMENT	() () () ()	() () () () () () ()
B - 186	SERVE BETWEEN-MEAL NOURISHMENT TO PATIENTS	() () () ()	() () () () () () ()
B - 187	SERVE PRESCRIBED DIETS TO PATIENTS	() () () ()	() () () () () () ()
B - 188	SET UP OR APPLY ELECTRONIC MONITORING DEVICES TO PATIENTS	() () () ()	() () () () () () ()
B - 189	SET UP OR USE SUCTION EQUIPMENT	() () () ()	() () () () () () ()
B - 190	SET UP BALKIN FRAME FOR SKELETAL TRACTION	() () () ()	() () () () () () ()

INVOLVEMENT
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		INVOLVEMENT a b c d	TIME SPENT SCALE 1 2 3 4 5 6 7
B - 191	START BLOOD TRANSFUSION	() () () ()	() () () () () () ()
B - 192	SUGGEST/ORDER LABORATORY OR x-RAY PROCEDURES FOR PATIENTS	() () () ()	() () () () () () ()
B - 193	SUPERVISE THE PREPARATION OF MEALS FOR THE PATIENTS	() () () ()	() () () () () () ()
B - 194	SUPERVISE THE FORMULATION OF PRESCRIBED DIETS IN THE ABSENCE OF DIETICIAN	() () () ()	() () () () () () ()
B - 195	SUPERVISE PHYSICAL CONDITIONING PROGRAMS	() () () ()	() () () () () () ()
B - 196	TAKE AND RECORD BLOOD PRESSURES	() () () ()	() () () () () () ()
B - 197	TAKE AND RECORD PULSES, TEMPERATURES AND RESPIRATIONS	() () () ()	() () () () () () ()
B - 198	TAKE CULTURES TO DETERMINE THE EXISTENCE OF DISEASE-PRODUCING ORGANISMS	() () () ()	() () () () () () ()
B - 199	TAKE ELECTROCARDIOGRAPH (EKG) TRACINGS	() () () ()	() () () () () () ()
B - 200	TAKE X-RAYS	() () () ()	() () () () () () ()
B - 201	TEACH CARDIAC CARE TO PATIENTS	() () () ()	() () () () () () ()
B - 202	TEACH DIABETIC CARE TO PATIENTS	() () () ()	() () () () () () ()
B - 203	TEACH PATIENT ABOUT POSTOPERATIVE RECOVERY PROCEDURES SUCH AS EXTREMITY MOVEMENTS, DEEP BREATHING OR COUGHING	() () () ()	() () () () () () ()
B - 204	TEACH PATIENT ABOUT POSTURAL DRAINAGE	() () () ()	() () () () () () ()
B - 205	TEACH PATIENT TO ADMINISTER HIS OWN TREATMENT	() () () ()	() () () () () () ()
B - 206	TEACH PATIENT TO USE VARIOUS TYPES OF EQUIPMENT	() () () ()	() () () () () () ()
B - 207	TIE OFF OR CLAMP BLEEDERS	() () () ()	() () () () () () ()
B - 208	TRANSPORT OR ACCOMPANY PATIENTS WITHIN HOSPITAL	() () () ()	() () () () () () ()
B - 209	TRANSPORT PATIENTS ON LITTERS	() () () ()	() () () () () () ()
B - 210	TREAT SNAKE BITE	() () () ()	() () () () () () ()
B - 211	USE MECHANICAL DEVICES, SUCH AS HOYER LIFT, TO LIFT AND MOVE PATIENT	() () () ()	() () () () () () ()
B - 212	WASH ARTICLES OF PATIENTS CLOTHING	() () () ()	() () () () () () ()
B - 213	WRITE LETTERS OR MESSAGES FOR PATIENTS	() () () ()	() () () () () () ()
B - 214	WRITE NURSING ORDERS	() () () ()	() () () () () () ()
B - 215	ADMINISTER CHEMO-THERAPEUTIC DRUGS	() () () ()	() () () () () () ()
		() () () ()	() () () () () () ()
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		INVOLVEMENT a	b	c	d	TIME SPENT SCALE 1	2	3	4	5	6	7
C - 1	CLEANSE NEWBORN BABIES	()	()	()	()	()	()	()	()	()	()	()
C - 2	ADMINISTER CLEFT LIP CARE	()	()	()	()	()	()	()	()	()	()	()
C - 3	ASCERTAIN PATIENTS ATTITUDES/PREFERENCES FOR FAMILY PLANNING	()	()	()	()	()	()	()	()	()	()	()
C - 4	ACERTAIN PATIENTS ATTITUDES/EXPECTATIONS OF PREGNANCY AND CHILD BEARING	()	()	()	()	()	()	()	()	()	()	()
C - 5	ASSESS INFANTS RESPONSE TO FEEDING METHODS (GAVAGE, NIPPLE)	()	()	()	()	()	()	()	()	()	()	()
C - 6	ASSESS SIGNS AND SYMPTOMS OF PRECLAMPSIA/ECLAMPSIA	()	()	()	()	()	()	()	()	()	()	()
C - 7	ASSESS SIGNS OF HYPERACTIVITY IN CHILDREN	()	()	()	()	()	()	()	()	()	()	()
C - 8	ASSIST PPHYSICIAN/CNM WITH VAGINAL DELIVERIES	()	()	()	()	()	()	()	()	()	()	()
C - 9	CHECK FETAL HEART BEAT /RHYTHM/VOLUME	()	()	()	()	()	()	()	()	()	()	()
C - 10	CHECK ROOTING REFLEX	()	()	()	()	()	()	()	()	()	()	()
C - 11	CHECK STARTLE REFLEX/MORO REFLEX	()	()	()	()	()	()	()	()	()	()	()
C - 12	COLLECT HEEL PUNCH BLOOD SPECIMEN FOR PKU TESTING	()	()	()	()	()	()	()	()	()	()	()
C - 13	COLLECT URINE SPECIMEN FROM INFANTS	()	()	()	()	()	()	()	()	()	()	()
C - 14	COUNSEL AND INSTRUCT MOTHER ON BREAST FEEDING OF INFANT	()	()	()	()	()	()	()	()	()	()	()
C - 15	COUNSEL AND INSTRUCT IN THE TREATMENT REGIMEN FOR COLIC	()	()	()	()	()	()	()	()	()	()	()
C - 16	COUNSEL AND INSTRUCT IN THE TREATMENT AND REGIMEN FOR CRADLE CAP	()	()	()	()	()	()	()	()	()	()	()
C - 17	COUNSEL AND INSTRUCT IN THE TREATMENT REGIMEN FOR THRUSH	()	()	()	()	()	()	()	()	()	()	()
C - 18	COUNSEL AND INSTRUCT IN TREATMENT REGIMEN FOR ECZEMA	()	()	()	()	()	()	()	()	()	()	()
C - 19	COUNSEL AND INSTRUCT IN TREATMENT OF UMBILICAL HERNIA	()	()	()	()	()	()	()	()	()	()	()
C - 20	COUNSEL AND INSTURCT PARENTS ON DIETARY REGIMEN FOR INFANTS	()	()	()	()	()	()	()	()	()	()	()
C - 21	COUNSEL AND INSTRUCT ON MANAGEMENT AND BEHAVIORAL CHANGES	()	()	()	()	()	()	()	()	()	()	()
C - 22	COUNSEL AND INSTRUCT ON NORMAL CHILD GROWTH AND DEVELOPMENT	()	()	()	()	()	()	()	()	()	()	()
C - 23	COUNSEL AND INSTRUCT ON TREATMENT FOR MILD DEHYDRATION	()	()	()	()	()	()	()	()	()	()	()
C - 24	COUNSEL AND INSTRUCT ON TREATMENT REGIMEN FOR BLOOD DYSCRASIA	()	()	()	()	()	()	()	()	()	()	()
C - 25	COUNSEL AND INSTRUCT ON TREATMENT REGIMEN FOR CROUP	()	()	()	()	()	()	()	()	()	()	()
C - 26	COUNSEL AND INSTRUCT ON TREATMENT REGIMEN FOR FEBRILE TWITCHING AND CONVULSIONS	()	()	()	()	()	()	()	()	()	()	()
C - 27	COUNSEL AND INSTRUCT ON THE TREATMENT REGIMEN FOR INFANT RASHES	()	()	()	()	()	()	()	()	()	()	()
C - 28	COUNSEL AND INSTRUCT PARENT REGARDING INFANT ANOMALITES	()	()	()	()	()	()	()	()	()	()	()
C - 29	COUNSEL AND INSTRUCT PARENTS ON ADJUSTMENT OF FAMILY TO INFANT	()	()	()	()	()	()	()	()	()	()	()
C - 30	FEED INFANTS	()	()	()	()	()	()	()	()	()	()	()
C - 31	COUNSEL AND INSTRUCT PATIENT IN TREATMENT REGIMEN FOR PRECLAMPSIA	()	()	()	()	()	()	()	()	()	()	()
C - 32	COUNSEL AND INSTRUCT PATIENT/SPOUSE IN THE USE OF CONTRACEPTIVE MEASURES	()	()	()	()	()	()	()	()	()	()	()
C - 33	COUNSEL AND INSTRUCT PATIENT IN THE TREATMENT REGIMEN FOR MENOPAUSAL SYNDROME	()	()	()	()	()	()	()	()	()	()	()
C - 34	COUNSEL AND INSTRUCT PATIENT IN POST OPERATIVE REGIMEN FOR GYNECOLOGICAL SURGERY	()	()	()	()	()	()	()	()	()	()	()
C - 35	COUNSEL AND SUPPORT PARENTS OF CHILD WITH GENETIC DISORDER	()	()	()	()	()	()	()	()	()	()	()
C - 36	COUNSEL AND SUPPORT PARENTS OF CHILD WITH INTELLECTUAL DEFICITS	()	()	()	()	()	()	()	()	()	()	()
C - 37	COUNSEL AND SUPPORT PARENTS OF CHILD WITH NONGENETIC CONGENTITAL DISORDERS	()	()	()	()	()	()	()	()	()	()	()
C - 38	COUNSEL PARENTS ON SEX EDUCATION OF CHILDREN	()	()	()	()	()	()	()	()	()	()	()

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		INVOLVEMENT a	b	c	d	TIME SPENT SCALE 1	2	3	4	5	6	7
C- 39	DETECT FETAL HEART RATE WITH ULTRASOUND	()	()	()	()	()	()	()	()	()	()	()
C- 40	DO NITRAZINE/FERN TEST FOR AMNIOTIC FLUID	()	()	()	()	()	()	()	()	()	()	()
C- 41	DO VISUAL ACUITY USING SNELLEN CHART	()	()	()	()	()	()	()	()	()	()	()
C- 42	EVALUATE GROWTH AND DEVELOPMENT OF CHILD FOR STRUCTURAL/FUNCTIONAL DEVIATIONS	()	()	()	()	()	()	()	()	()	()	()
C- 43	EVALUATE SUITABILITY OF CONTRACEPTIVE METHOD USED BY PATIENT	()	()	()	()	()	()	()	()	()	()	()
C- 44	EVALUATE PATIENT WITH SIDE EFFECT FROM CONTRACEPTIVE MEASURE	()	()	()	()	()	()	()	()	()	()	()
C- 45	EXAMINE CHILDS FEET FOR PIGEON TOE (TALIPES CARUS)	()	()	()	()	()	()	()	()	()	()	()
C- 46	EXAMINE PATIENT TO DETERMINE PRESENCE OF LABOR	()	()	()	()	()	()	()	()	()	()	()
C- 47	EXPLAIN/ANSWER MOTHERS QUESTIONS REGARDING POST PARTUM CARE	()	()	()	()	()	()	()	()	()	()	()
C- 48	EXPLAIN/ANSWER PARENTS QUESTIONS ON DEVELOPMENTAL PROBLEMS	()	()	()	()	()	()	()	()	()	()	()
C- 49	EXPLAIN/ANSWER PARENTS QUESTIONS REGARDING INFANT CARE	()	()	()	()	()	()	()	()	()	()	()
C- 50	GAVAGE PREMATURE INFANT	()	()	()	()	()	()	()	()	()	()	()
C- 51	GIVE PREMATURE INFANT CARE, E.G. POSITION IN INCUBATOR, FEED	()	()	()	()	()	()	()	()	()	()	()
C- 52	GIVE UMBICAL CORD CARE, E.G. CLEAN, DRESS, REMOVE CLAMP	()	()	()	()	()	()	()	()	()	()	()
C- 53	HELP NEW MOTHER BREAST FEED/BOTTLE FEED INFANT	()	()	()	()	()	()	()	()	()	()	()
C- 54	IDENTIFY/REPORT ABNORMAL CRY OF INFANT, E.G. WEAK, HIGH PITCH	()	()	()	()	()	()	()	()	()	()	()
C- 55	INITIATE ORAL CONTRACEPTIVE REGIMEN FOR PATIENT	()	()	()	()	()	()	()	()	()	()	()
C- 56	INSERT INTRAUTERINE DEVICE (IUD)	()	()	()	()	()	()	()	()	()	()	()
C- 57	INSTRUCT PARENTS ON CARE OF CHILD WITH COMMUNICABLE DISEASE	()	()	()	()	()	()	()	()	()	()	()
C- 58	INSTRUCT PARENTS ABOUT ACTIVITIES THAT PROMOTE DEVELOPMENT	()	()	()	()	()	()	()	()	()	()	()
C- 59	INTERPRET FETAL MONITOR READOUT	()	()	()	()	()	()	()	()	()	()	()
C- 60	MAKE PROVISIONS FOR FATHER/RELATIVES TO SEE NEWBORN	()	()	()	()	()	()	()	()	()	()	()
C- 61	MASSAGE FUNDUS OF POSTPARTUM PATIENT	()	()	()	()	()	()	()	()	()	()	()
C- 62	MEASURE FUNDAL HEIGHT DURING PREGNANCY	()	()	()	()	()	()	()	()	()	()	()
C- 63	MONITOR INFANTS TRANSITION TO EXTRA-UTERINE LIFE DURING FIRST TWELVE HOURS	()	()	()	()	()	()	()	()	()	()	()
C- 64	MONITOR PATIENT DURING FIRST HOUR AFTER DELIVERY	()	()	()	()	()	()	()	()	()	()	()
C- 65	MONITOR REPRODUCTIVE STERILIZATION REPORTS	()	()	()	()	()	()	()	()	()	()	()
C- 66	MONITOR TEMPERATURE OF INFANT IN ISOLETTE/INCUBATOR	()	()	()	()	()	()	()	()	()	()	()
C- 67	OBSERVE FOR EMOTIONAL DISTURBANCE IN CHILDREN	()	()	()	()	()	()	()	()	()	()	()
C- 68	OBTAIN BIRTH HISTORY	()	()	()	()	()	()	()	()	()	()	()
C- 69	OBTAIN DEVELOPMENTAL HISTORY OF CHILD	()	()	()	()	()	()	()	()	()	()	()
C- 70	OBATIN OBSTETRICAL HISTORY	()	()	()	()	()	()	()	()	()	()	()
C- 71	OBTAIN PRENATAL HISTORY	()	()	()	()	()	()	()	()	()	()	()
C- 72	OBTAIN POSTPARTUM HISTORY	()	()	()	()	()	()	()	()	()	()	()
C- 73	OBTAIN MENSTRUAL, FERTILITY AND CONTRACEPTIVE HISTORY	()	()	()	()	()	()	()	()	()	()	()
C- 74	PALPATE CHEST FOR MASSES/NODES	()	()	()	()	()	()	()	()	()	()	()
C- 75	PALPATE FONTANELS FOR EDEMA AND/OR CLOSURE	()	()	()	()	()	()	()	()	()	()	()
C- 76	PALPATE FUNDUS/UTERUS FOR FIRMNESS AND/OR LEVEL OF INVOLUTION	()	()	()	()	()	()	()	()	()	()	()

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		INVOLVEMENT a	b	c	d	TIME SPENT SCALE 1	2	3	4	5	6	7
C - 77	PERFORM DEVELOPMENTAL SCREENING EXAMINATIONS OF CHILDREN	()	()	()	()	()	()	()	()	()	()	()
C - 78	PERFORM PAP SMEARS	()	()	()	()	()	()	()	()	()	()	()
C - 79	PERFORM POSTPARTUM CHECK, E.G. BREAST, ABDOMEN, PERINEUM, ETC.	()	()	()	()	()	()	()	()	()	()	()
C - 80	PLACE INFANT IN PHOTOTHERAPY (BILIRIRUBIN LIGHT)	()	()	()	()	()	()	()	()	()	()	()
C - 81	PLOT FINDINGS ON DENVER DEVELOPMENTAL SCORE SHEET	()	()	()	()	()	()	()	()	()	()	()
C - 82	PLOT GROWTH CURVE, E.G. BOSTON CURVE	()	()	()	()	()	()	()	()	()	()	()
C - 83	PREPARE INFANT I.D. BANDS OR FOOTPRINTS	()	()	()	()	()	()	()	()	()	()	()
C - 84	PRESCRIBE TREATMENT AND COUNSEL FOR CRADLE CAP	()	()	()	()	()	()	()	()	()	()	()
C - 85	PRESCRIBE TREATMENT AND COUNSEL FOR THRUSH	()	()	()	()	()	()	()	()	()	()	()
C - 86	PRESCRIBE TREATMENT AND COUNSEL FOR COLIC	()	()	()	()	()	()	()	()	()	()	()
C - 87	PRESCRIBE TREATMENT AND COUNSEL FOR INFANT RASHES	()	()	()	()	()	()	()	()	()	()	()
C - 88	PRESCRIBE TREATMENT AND COUNSEL FOR MILD DEHYDRATION OF INFANT	()	()	()	()	()	()	()	()	()	()	()
C - 89	PREPARE AND TAKE INFANT TO MOTHER	()	()	()	()	()	()	()	()	()	()	()
C - 90	PREVENT OR CARE FOR POSTPARTUM HEMORRHAGE	()	()	()	()	()	()	()	()	()	()	()
C - 91	REASSURE APPREHENSIVE PARENTS OF PEDIATRIC PATIENT	()	()	()	()	()	()	()	()	()	()	()
C - 92	REMOVE VAGINAL PACKINGS	()	()	()	()	()	()	()	()	()	()	()
C - 93	SET UP AND REGULATE CROUPETTE	()	()	()	()	()	()	()	()	()	()	()
C - 94	SET UP AND REGULATE ISOLETTE OR INCUBATOR	()	()	()	()	()	()	()	()	()	()	()
C - 95	TAKE INFANTS VITAL SIGNS	()	()	()	()	()	()	()	()	()	()	()
C - 96	TEACH PARENTS RECOGNITION AND PREVENTION OF FOOD ALLERGIES IN CHILDREN	()	()	()	()	()	()	()	()	()	()	()
C - 97	TEACH POSTPARTUM CLASSES, E.G. BATH DEMONSTRATIONS, FEEDING	()	()	()	()	()	()	()	()	()	()	()
C - 98	TEACH PRE-NATAL CARE	()	()	()	()	()	()	()	()	()	()	()
C - 99	TEACH PRE-NATAL CLASS	()	()	()	()	()	()	()	()	()	()	()
C - 100	TEACH PATIENT/PARENTS ABOUT THE PHYSIOLOGY OF PREGNANCY	()	()	()	()	()	()	()	()	()	()	()
C - 101	TEST HEARING ACUITY WITH WATCH, ETC.	()	()	()	()	()	()	()	()	()	()	()
C - 102	TEST HEARING ACUITY WITH A TUNING FORK	()	()	()	()	()	()	()	()	()	()	()
		()	()	()	()	()	()	()	()	()	()	()
		()	()	()	()	()	()	()	()	()	()	()
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OPERATING, LABOR AND DELIVERY ROOM	INVOLVEMENT a b c d	TIME SPENT SCALE 1 2 3 4 5 6 7
D - 1 ADMINISTER NASAL/BUCCAL OXYTOCIN	( ) ( ) ( ) ( )	( ) ( ) ( ) ( ) ( ) ( ) ( )
D - 2 ADMINISTER/PROVIDE TRILENE MASK TO PATIENT	( ) ( ) ( ) ( )	( ) ( ) ( ) ( ) ( ) ( ) ( )
D - 3 ADJUST SURGICAL INSTRUMENTS/EQUIPMENT DURING SURGERY	( ) ( ) ( ) ( )	( ) ( ) ( ) ( ) ( ) ( ) ( )
D - 4 ASSESS FETAL WELL BEING DURING LABOR	( ) ( ) ( ) ( )	( ) ( ) ( ) ( ) ( ) ( ) ( )
D - 5 ASSIST ANETHETIST DURING O.R. OR DELIVERY ROOM PROCEDURE	( ) ( ) ( ) ( )	( ) ( ) ( ) ( ) ( ) ( ) ( )
D - 6 ASSIST IN PERFORMING CYSTOSCOPY	( ) ( ) ( ) ( )	( ) ( ) ( ) ( ) ( ) ( ) ( )
D - 7 ASSIST PHYSICIAN OR NURSE WITH INFANT DELIVERIES	( ) ( ) ( ) ( )	( ) ( ) ( ) ( ) ( ) ( ) ( )
D - 8 ASSIST SURGEON DURING OPERATION BY RETRACTING OR SPONGING	( ) ( ) ( ) ( )	( ) ( ) ( ) ( ) ( ) ( ) ( )
D - 9 BREAK DOWN SURGICAL INSTRUMENTS FOR POST OPERATIVE CLEANING	( ) ( ) ( ) ( )	( ) ( ) ( ) ( ) ( ) ( ) ( )
D - 10 CHECK PATIENT IN LABOR FOR CROWNING/BREECH/CORD	( ) ( ) ( ) ( )	( ) ( ) ( ) ( ) ( ) ( ) ( )
D - 11 CLEAN DELIVERY OR OPERATING ROOM	( ) ( ) ( ) ( )	( ) ( ) ( ) ( ) ( ) ( ) ( )
D - 12 CLEAN AND REPOSITION INSTRUMENTS DURING SURGERY	( ) ( ) ( ) ( )	( ) ( ) ( ) ( ) ( ) ( ) ( )
D - 13 CLEAN/DISINFECT O.R. FLOORS/FURNITURE AFTER EACH CASE	( ) ( ) ( ) ( )	( ) ( ) ( ) ( ) ( ) ( ) ( )
D - 14 CIRCULATE DURING OPERATIONS AND ANTICIPATE THE NEEDS OF SCRUBBED MEMBERS OF SURGICAL TEAMS OR ANESTHETISTS	( ) ( ) ( ) ( )	( ) ( ) ( ) ( ) ( ) ( ) ( )
D - 15 COLLECT CORD BLOOD SAMPLES	( ) ( ) ( ) ( )	( ) ( ) ( ) ( ) ( ) ( ) ( )
D - 16 COORDINATE O.R. SCHEDULES WITH O.R. TEAMS/PATIENTS NURSING UNIT	( ) ( ) ( ) ( )	( ) ( ) ( ) ( ) ( ) ( ) ( )
D - 17 COUNT SPONGES DURING/AFTER SURGICAL PROCEDURE	( ) ( ) ( ) ( )	( ) ( ) ( ) ( ) ( ) ( ) ( )
D - 18 COUNT NEEDLES/INSTRUMENTS PRE/POST SURGERY	( ) ( ) ( ) ( )	( ) ( ) ( ) ( ) ( ) ( ) ( )
D - 19 COUNT VAGINAL PADS FOR ESTIMATING BLOOD LOSS	( ) ( ) ( ) ( )	( ) ( ) ( ) ( ) ( ) ( ) ( )
D - 20 CUT SUTURES AT SURGICAL SITE	( ) ( ) ( ) ( )	( ) ( ) ( ) ( ) ( ) ( ) ( )
D - 21 DELIVER BABY	( ) ( ) ( ) ( )	( ) ( ) ( ) ( ) ( ) ( ) ( )
D - 22 DETERMINE LENGTH OF STAY FOR PATINET IN RECOVERY ROOM	( ) ( ) ( ) ( )	( ) ( ) ( ) ( ) ( ) ( ) ( )
D - 23 DETERMINE TYPES OF EQUIPMENT/SUPPLIES TO USE FOR CLEANING	( ) ( ) ( ) ( )	( ) ( ) ( ) ( ) ( ) ( ) ( )
D - 24 DIRECT PREPARATION, DISINFECTION AND CARE OF O.R./ DELIVERY ROOM	( ) ( ) ( ) ( )	( ) ( ) ( ) ( ) ( ) ( ) ( )
D - 25 DIRECT PREPARATION OF OPERATIVE SITES FOR SURGERY	( ) ( ) ( ) ( )	( ) ( ) ( ) ( ) ( ) ( ) ( )
D - 26 DIRECT PREPARATION OF SUPPLIES/EQUIPMENT FOR DELIVERY ROOM	( ) ( ) ( ) ( )	( ) ( ) ( ) ( ) ( ) ( ) ( )
D - 27 DIRECT PREPARATION OF SUPPLIES/EQUIPMENT FOR O.R.	( ) ( ) ( ) ( )	( ) ( ) ( ) ( ) ( ) ( ) ( )
D - 28 ENSURE COMPLETENESS OF PREOPERATIVE PATINET PREPARATION	( ) ( ) ( ) ( )	( ) ( ) ( ) ( ) ( ) ( ) ( )
D - 29 ENSURE PERFORMANCE OF CONDUCTIVITY AND ELECTRICAL HAZARD CHECK	( ) ( ) ( ) ( )	( ) ( ) ( ) ( ) ( ) ( ) ( )
D - 30 ESTABLISH/MAINTAIN SUTURE/INSTRUMENT TRAY CARDS	( ) ( ) ( ) ( )	( ) ( ) ( ) ( ) ( ) ( ) ( )
D - 31 ESTABLISH SURGERY SCHEDULE	( ) ( ) ( ) ( )	( ) ( ) ( ) ( ) ( ) ( ) ( )
D - 32 EVALUATE EFFECTIVENESS OF UTERINE CONTRACTIONS	( ) ( ) ( ) ( )	( ) ( ) ( ) ( ) ( ) ( ) ( )
D - 33 EVALUATE PATIENT'S RESPONSE (NEED FOR MEDICATION) TO LABOR	( ) ( ) ( ) ( )	( ) ( ) ( ) ( ) ( ) ( ) ( )
D - 34 FLASH STERILIZE INSTRUMENTS	( ) ( ) ( ) ( )	( ) ( ) ( ) ( ) ( ) ( ) ( )
D - 35 FUNCTION IN ON-CALL STATUS	( ) ( ) ( ) ( )	( ) ( ) ( ) ( ) ( ) ( ) ( )
D - 36 GIVE EMERGENCY TREATMENT/FIRST AID FOR FETAL BRADYCARDIA/ TACHYCARDIA	( ) ( ) ( ) ( )	( ) ( ) ( ) ( ) ( ) ( ) ( )
D - 37 GOWN FOR STERILE PROCEDURE	( ) ( ) ( ) ( )	( ) ( ) ( ) ( ) ( ) ( ) ( )
D - 38 INSPECT FOR HEALTH HAZARDS IN OPERATING ROOM	( ) ( ) ( ) ( )	( ) ( ) ( ) ( ) ( ) ( ) ( )

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	INVOLVEMENT a b c d	TIME SPENT SCALE 1 2 3 4 5 6 7
D - 39 LABEL MEDICINE GLASSES WITH NAME AND AMOUNT OF DRUG FOR STERILE FIELD	() () () ()	() () () () () () ()
D - 40 LOG CHANGES/DELETIONS OF PROCEDURES ON SLATE IN O.R.	() () () ()	() () () () () () ()
D - 41 MAINTAIN PROPER HUMIDITY/TEMPERATURE IN O.R.	() () () ()	() () () () () () ()
D - 42 MAINTAIN DRY STERILE FIELD DURING SURGERY	() () () ()	() () () () () () ()
D - 43 MAINTAIN RECORD OF SURGICAL PROCEDURES	() () () ()	() () () () () () ()
D - 44 MAKE ENTRIES ON LABOR/DELIVERY RECORD	() () () ()	() () () () () () ()
D - 45 MAKE UP INSTURMENT SETS OR SURGICAL PACKS FOR DELIVERY ROOM PROCEDURES	() () () ()	() () () () () () ()
D - 46 MAKE UP INSTRUMENT SETS/SURGICAL PACKS FOR O.R. PROCEDURES	() () () ()	() () () () () () ()
D - 47 MONITOR FETAL HEART TONES	() () () ()	() () () () () () ()
D - 48 MONITOR MAINTENANCE OF ASEPTIC TECHNIQUE	() () () ()	() () () () () () ()
D - 49 MONITOR PATIENT BLOOD LOSS	() () () ()	() () () () () () ()
D - 50 MONITOR THE PROGRESS OF PATIENTS IN LABOR	() () () ()	() () () () () () ()
D - 51 OBTAIN HISTORY OF PRESENT LABOR	() () () ()	() () () () () () ()
D - 52 OBTAIN PROSTHESIS FOR SURGICAL PROCEDURE (PIN, PLATE, ETC.)	() () () ()	() () () () () () ()
D - 53 ORGANIZE PERSONNEL ASSISTING WITH DELIVERY ROOM PROCEDURES	() () () ()	() () () () () () ()
D - 54 ORGANIZE PERSONNEL ASSISTING WITH SURGICAL PROCEDURES	() () () ()	() () () () () () ()
D - 55 PALPATE UTERUS TO DETERMINE POSITION/PRESENTATION OF FETUS	() () () ()	() () () () () () ()
D - 56 PALPATE UTERUS FOR LENGTH, STRENGTH AND FREQUENCY OF CONTRACT	() () () ()	() () () () () () ()
D - 57 PASS INSTRUMENTS TO PHYSICIANS	() () () ()	() () () () () () ()
D - 58 PASS STERILE ACCESSORIES/EQUIP CORD TO CIRCULATOR FOR CONN.	() () () ()	() () () () () () ()
D - 59 PASS STERILE DRAPES TO SURGEON	() () () ()	() () () () () () ()
D - 60 PERFORM DIGITAL EXAM TO DETERMINE CERVICAL DILATION AND EFFACEMENT	() () () ()	() () () () () () ()
D - 61 PERFORM PERINEAL CARE	() () () ()	() () () () () () ()
D - 62 POSITION PATIENT FOR OR DURING DELIVERY ROOM PROCEDURES	() () () ()	() () () () () () ()
D - 63 POSITION PATIENT FOR OR DURING SURGICAL PROCEDURES	() () () ()	() () () () () () ()
D - 64 PREPARE PERINEAL AREA OF PATIENT FOR INFANT DELIVERY	() () () ()	() () () () () () ()
D - 65 PREPARE OPERATIVE AREA OF PATIENT FOR SURGERY	() () () ()	() () () () () () ()
D - 66 PREPARE SILK, COTTON, WIRE SUTURES FOR STERILIZATION	() () () ()	() () () () () () ()
D - 67 REMOVE CONTAMINATED GLOVES FROM SURGICAL TEAM	() () () ()	() () () () () () ()
D - 68 REMOVE FLUID FROM SURGICAL SITE WITH SPONGES OR SUCTION	() () () ()	() () () () () () ()
D - 69 SCRUB, GOWN, AND GLOVE IN PREPARATION FOR STERILE PROCEDURES	() () () ()	() () () () () () ()
D - 70 SELECT/SET UP INSTRUMENTS FOR SPECIAL SURGICAL PROCEDURES	() () () ()	() () () () () () ()
D - 71 SET UP MAYO STAND WITH INSTRUMENTS	() () () ()	() () () () () () ()
D - 72 SET UP SURGICAL BACK TABLE WITH STERILE INSTRUMENTS/EQUIP	() () () ()	() () () () () () ()
D - 73 SET UP O.R. FOR SEPTIC CASE	() () () ()	() () () () () () ()
D - 74 SPECIFY CLOTHING REQUIRED FOR PROTECTION FROM EQUIP HAZARDS	() () () ()	() () () () () () ()
D - 75 SUPERVISE PERFORMANCE OF PERSONNEL DURING DELIVERY ROOM OPS.	() () () ()	() () () () () () ()
D - 76 SUPERVISE THE PERFORMANCE OF PERSONNEL DURING O.R. PROCEDURES	() () () ()	() () () () () () ()

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	INVOLVEMENT a b c d	TIME SPENT SCALE 1 2 3 4 5 6 7
D - 77 SUPPLY PHYSICAL COMFORT TO SURGICAL TEAM, E.G. WIPE BROW,ETC.	() () () ()	() () () () () () ()
D - 78 SUPPORT, COACH AND REMAIN WITH PATIENT DURING LABOR	() () () ()	() () () () () () ()
D - 79 TIE UP SURGICAL GOWN FOR SCRUBBED PERSONNEL	() () () ()	() () () () () () ()
D - 80 TAKE FINGERPRINTS, FOOTPRINTS	() () () ()	() () () () () () ()
D - 81 TREAT NEWBORNS EYES WITH PROPHYLAXIS	() () () ()	() () () () () () ()
	() () () ()	() () () () () () ()
	() () () ()	() () () () () () ()
	() () () ()	() () () () () () ()
	() () () ()	() () () () () () ()
ANESTHETIST		
E - 1 ADMINISTER LOCAL INTERCOSTAL BLOCK ANESTHESIA	() () () ()	() () () () () () ()
E - 2 ADMINISTER CYCLOPROPANE ANESTHESIA	() () () ()	() () () () () () ()
E - 3 ADMINISTER ETHER ANESTHESIA	() () () ()	() () () () () () ()
E - 4 ADMINISTER NITROUS OXIDE ANESTHESIA	() () () ()	() () () () () () ()
E - 5 ADMINISTER PENTHRANE ANESTHESIA	() () () ()	() () () () () () ()
E - 6 ADMINISTER FLUCTHANE ANESTHESIA	() () () ()	() () () () () () ()
E - 7 ADMINISTER COMBINATION OF NEOROLEPTIC DRUG ANALGESIC AND NITROUS OXIDE ANESTHESIA	() () () ()	() () () () () () ()
E - 8 ADMINISTER I.V. SODIUM PENTOTHAL ANESTHESIA	() () () ()	() () () () () () ()
E - 9 ADMINISTER I.V. REGIONAL ANESTHESIA (BIER BLOCK)	() () () ()	() () () () () () ()
E - 10 ADMINISTER RECTAL PENTATHOL ANESTHESIA	() () () ()	() () () () () () ()
E - 11 ADMINISTER CAUDAL ANESTHESIA	() () () ()	() () () () () () ()
E - 12 ADMINISTER EPIDURAL ANESTHESIA	() () () ()	() () () () () () ()
E - 13 ADMINISTER SADDLE BLOCK ANESTHESIA	() () () ()	() () () () () () ()
E - 14 ADMINISTER HYPERBARIC SPINAL ANESTHESIA	() () () ()	() () () () () () ()
E - 15 ADMINISTER HYPOBARIC SPINAL ANESTHESIA	() () () ()	() () () () () () ()
E - 16 ADMINISTER ISOBARIC ANESTHESIA	() () () ()	() () () () () () ()
E - 17 ADMINISTER TAYLOR SPINAL ANESTHESIA	() () () ()	() () () () () () ()
E - 18 ADMINISTER DIGITAL BLOCK ANESTHESIA	() () () ()	() () () () () () ()
E - 19 ADMINISTER BRACHIAL BLOCK ANESTHESIA	() () () ()	() () () () () () ()
E - 20 ADMINISTER AXILLARY BLOCK ANESTHESIA	() () () ()	() () () () () () ()
E - 21 ADMINISTER LOCAL INTERCOSTAL BLOCK ANESTHESIA	() () () ()	() () () () () () ()
E - 22 ADMINISTER INTERSCALENE BLOCK ANESTHESIA	() () () ()	() () () () () () ()
E - 23 ADMINISTER LOCAL ELBOW BLOCK ANESTHESIA	() () () ()	() () () () () () ()
E - 24 ADMINISTER REGIONAL BLOCK ANESTHESIA	() () () ()	() () () () () () ()
E - 25 ADMINISTER PARAVERTEBRAL ANESTHESIA	() () () ()	() () () () () () ()
E - 26 ADMINISTER LOCAL ANKLE BLOCK ANESTHESIA	() () () ()	() () () () () () ()
E - 27 ADMINISTER SCIATIC NERVE BLOCK ANESTHESIA	() () () ()	() () () () () () ()

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	INVOLVEMENT a	b	c	d	TIME SPENT SCALE 1	2	3	4	5	6	7
E - 28 ADMINISTER ANESTHESIA USING OPEN MACHINE TECHNIQUE	()	()	()	()	()	()	()	()	()	()	()
E - 29 ADMINISTER ANESTHESIA BY SEMI-OPEN (DROP METHOD) MACHINE	()	()	()	()	()	()	()	()	()	()	()
E - 30 ADMINISTER ANESTHESIA USING MASK TECHNIQUE	()	()	()	()	()	()	()	()	()	()	()
E - 31 ADMINISTER ANESTHESIA USING CLOSED-TOTAL REBREATHING MACHINE	()	()	()	()	()	()	()	()	()	()	()
E - 32 ADMINISTER ANESTHESIA USING NON-REBREATHING TECHNIQUE	()	()	()	()	()	()	()	()	()	()	()
E - 33 ADMINISTER ANESTHESIA USING PARTIAL REBREATHING MACHINE	()	()	()	()	()	()	()	()	()	()	()
E - 34 DETERMINE AIRWAY TO USE DURING ANESTHESIA ADMINISTRATION	()	()	()	()	()	()	()	()	()	()	()
E - 35 DETERMINE DOSE AND TYPE OF ANESTHETIC AGENT	()	()	()	()	()	()	()	()	()	()	()
E - 36 DETERMINE NEED FOR USE OF VENTILATOR DURING/AFTER ANESTHESIA	()	()	()	()	()	()	()	()	()	()	()
E - 37 DETERMINE TREATMENT FOR PATIENT WITH HYCTHERMIA/HYPERYREXIA	()	()	()	()	()	()	()	()	()	()	()
E - 38 DETERMINE TYPE, DOSE AND SCHEDULE FOR PRE-OPERATIVE MEDICINE	()	()	()	()	()	()	()	()	()	()	()
E - 39 DETERMINE WHEN TO GIVE PREOPERATIVE MEDICATION	()	()	()	()	()	()	()	()	()	()	()
E - 40 DETECT PRESENCE OF EMBOLUS USING DOPLER MONITOR	()	()	()	()	()	()	()	()	()	()	()
E - 41 EVALUATE PATIENTS SUITABILITY TO UNDERGO SURGERY	()	()	()	()	()	()	()	()	()	()	()
E - 42 EXPLAIN ANESTHESIA PROCEDURE TO PATIENT	()	()	()	()	()	()	()	()	()	()	()
E - 43 INSURE SAFE HANDLING AND STORAGE OR EXPLOSIVE MATERIALS	()	()	()	()	()	()	()	()	()	()	()
E - 44 INTUBATE PATIENTS TRACHEA/LARYNX	()	()	()	()	()	()	()	()	()	()	()
E - 45 MAINTAIN ANESTHESIA DURING OPERATIVE, DELIVERY ROOM OR DIAGNOSTIC PROCEDURES	()	()	()	()	()	()	()	()	()	()	()
E - 46 MAINTAIN EQUIPMENT AND SUPPLIES USED FOR ADMINISTRATION OF ANESTHETIC AGENTS	()	()	()	()	()	()	()	()	()	()	()
E - 47 MAINTAIN SUPPLY OF ANESTHETIC AGENTS AND ACCESSORY DRUGS	()	()	()	()	()	()	()	()	()	()	()
E - 48 MAINTAIN ANESTHESIA LOG/RECORDS	()	()	()	()	()	()	()	()	()	()	()
E - 49 MAKE ENTRIES ON TO ANESTHESIA RECORD	()	()	()	()	()	()	()	()	()	()	()
E - 50 MONITOR PATIENTS LEVEL OF PAIN OR CONSCIOUSNESS	()	()	()	()	()	()	()	()	()	()	()
E - 51 MONITOR SPINAL ANESTHESIA	()	()	()	()	()	()	()	()	()	()	()
E - 52 OBSERVE PATIENTS CONDITION IN ORDER TO ADVISE SURGEON	()	()	()	()	()	()	()	()	()	()	()
E - 53 MONITOR BLOCK AID	()	()	()	()	()	()	()	()	()	()	()
E - 54 MONITOR PRECORDIAL HEART BEAT	()	()	()	()	()	()	()	()	()	()	()
E - 55 PERFORM REMEDIAL MEASURES TO COUNTERACT UNFAVORABLE SYMPTOMS DURING ANESTHESIA	()	()	()	()	()	()	()	()	()	()	()
E - 56 PERFORM VENTILATING BRONCHOSCOPY USING SANDERS INJECTOR	()	()	()	()	()	()	()	()	()	()	()
E - 57 PRESCRIBE TYPE AND AMOUNT OF INTRAVENOUS FLUID THERAPY	()	()	()	()	()	()	()	()	()	()	()
E - 58 RECORD ANESTHESIA DATA DURING SURGICAL PROCEDURES	()	()	()	()	()	()	()	()	()	()	()
E - 59 REVIEW PATIENTS MEDICAL ORDERS AND CONDITION PRIOR TO GIVING ANESTHESIA	()	()	()	()	()	()	()	()	()	()	()
E - 60 SUPERVISE NURSE STUDENTS IN ADMINISTRATION OF ANESTHESIA	()	()	()	()	()	()	()	()	()	()	()
E - 61 SUPERVISE OR INSTRUCT PERSONNEL IN USE OR MAINTENANCE OF RESUSCITATIVE APPARATUS	()	()	()	()	()	()	()	()	()	()	()
E - 62 TERMINATE ANESTHESIA AND RECOVER PATIENT FROM ANESTHESIA	()	()	()	()	()	()	()	()	()	()	()
	()	()	()	()	()	()	()	()	()	()	()

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	PSYCHIATRIC	INVOLVEMENT a	b	c	d	TIME SPENT SCALE 1	2	3	4	5	6	7
F - 1	ADMINISTER PSYCHOLOGICAL TESTS	()	()	()	()	()	()	()	()	()	()	()
F - 2	ADVISE NON-NP PERSONNEL, VISITORS ABOUT THEIR BEHAVIOR WITH PSYCHIATRIC PATIENTS	()	()	()	()	()	()	()	()	()	()	()
F - 3	ASK PATIENT TO LEAVE THERAPY GROUP SESSION	()	()	()	()	()	()	()	()	()	()	()
F - 4	ASSESS PATIENTS DEGREE OF PSYCHOTIC BEHAVIOR	()	()	()	()	()	()	()	()	()	()	()
F - 5	ASSESS PATIENTS DEGREE OF NEUROTIC BEHAVIOR	()	()	()	()	()	()	()	()	()	()	()
F - 6	ASSIST PATIENT TO GAIN INSIGHT AND SELF AWARENESS THROUGH VERBALIZATION	()	()	()	()	()	()	()	()	()	()	()
F - 7	ASSIST WITH GROUP PSYCHOTHERAPY	()	()	()	()	()	()	()	()	()	()	()
F - 8	ASSIST WITH PSYCHODRAMA	()	()	()	()	()	()	()	()	()	()	()
F - 9	ASSIST WITH SHOCK THERAPY SUCH AS ELECTRO-CONVULSIVE, INSULIN OR INDOKLON	()	()	()	()	()	()	()	()	()	()	()
F - 10	BRING ABOUT CONTROLLED CONFRONTATION DURING GROUP THERAPY	()	()	()	()	()	()	()	()	()	()	()
F - 11	CARE FOR PATIENT IN LOCKED QUIET ROOM, E.G. TAKE TO BATHROOM	()	()	()	()	()	()	()	()	()	()	()
F - 12	CONDUCT GROUP PSYCHOTHERAPY	()	()	()	()	()	()	()	()	()	()	()
F - 13	CONDUCT INTAKE INTERVIEW ON PSYCHIATRIC PATIENT	()	()	()	()	()	()	()	()	()	()	()
F - 14	CONDUCT PATIENT WARD/GROUP MEETINGS	()	()	()	()	()	()	()	()	()	()	()
F - 15	CONFRONT PATIENT WITH INAPPROPRIATENESS OF HIS BEHAVIOR	()	()	()	()	()	()	()	()	()	()	()
F - 16	COUNSEL/INSTRUCT PATIENTS WITH SEXUAL PROBLEMS	()	()	()	()	()	()	()	()	()	()	()
F - 17	COUNSEL PATIENT WITH PSYCHOSOMATIC COMPLAINT	()	()	()	()	()	()	()	()	()	()	()
F - 18	DETERMINE PATIENT/STAFF RATIO (FOR INDIVIDUAL PATIENT)	()	()	()	()	()	()	()	()	()	()	()
F - 19	DETERMINE NEED FOR ADDITIONAL STAFF TO CONTROL COMBATIVE/ DISRUPTIVE BEHAVIORS	()	()	()	()	()	()	()	()	()	()	()
F - 20	DETERMINE WHEN AND EXTENT TO WHICH PATIENT MAY RESUME ACTIVITIES AFTER ECT	()	()	()	()	()	()	()	()	()	()	()
F - 21	DISTINGUISH GROUP PROCESSES FROM GROUP CONTENT	()	()	()	()	()	()	()	()	()	()	()
F - 22	ENCOURAGE GROUP DECISION/ACTION IN GROUP THERAPY	()	()	()	()	()	()	()	()	()	()	()
F - 23	ENCOURAGE THE VOICING OF COMPLAINTS IN GROUP THERAPY SESSIONS	()	()	()	()	()	()	()	()	()	()	()
F - 24	ENCOURAGE PATIENTS IN GROUP THERAPY TO DISCUSS GROUP EVENTS, E.G. OUTWARD HOSTILITY, EXPULSION OF MEMBER	()	()	()	()	()	()	()	()	()	()	()
F - 25	ENCOURAGE PATIENTS TO PARTICIPATE IN SOCIAL ACTIVITIES	()	()	()	()	()	()	()	()	()	()	()
F - 26	ENGAGE IN INDIVIDUAL (EXPLORATIVE) THERAPY WITH PATIENT	()	()	()	()	()	()	()	()	()	()	()
F - 27	EVALUATE AND COUNSEL PATIENT WITH MARITAL PROBLEMS	()	()	()	()	()	()	()	()	()	()	()
F - 28	EXPLAIN/PROVIDE INFORMATION TO PATIENT ABOUT THERAPY SESSIONS	()	()	()	()	()	()	()	()	()	()	()
F - 29	EXPLORE DYNAMICS OF GROUP INTERACTIONS WITH THERAPY GROUP	()	()	()	()	()	()	()	()	()	()	()
F - 30	FOLLOW-UP ON PATIENTS WORK THERAPY TO DETERMINE PERFORMANCE, SATISFACTION	()	()	()	()	()	()	()	()	()	()	()
F - 31	GIVE CARE TO PATIENT DURING ELECTRIC SHOCK THERAPY	()	()	()	()	()	()	()	()	()	()	()
F - 32	IDENTIFY PATIENTS UNDERLYING (REPRESSED) EMOTIONAL PROBLEMS	()	()	()	()	()	()	()	()	()	()	()
F - 33	IDENTIFY PATIENT WHOSE PERSONALITY INDICATES A POTENTIAL BEHAVIORAL PROBLEM, E.G. ANGER, IMPULSIVENESS	()	()	()	()	()	()	()	()	()	()	()
F - 34	INTERPRET PSYCHOLOGICAL TESTS	()	()	()	()	()	()	()	()	()	()	()
F - 35	INVOLVE PATIENTS IN THERAPEUTIC INTERACTION WITH ONE ANOTHER	()	()	()	()	()	()	()	()	()	()	()
F - 36	OBSERVE/RECORD BEHAVIORAL REACTIONS OF PSYCHIATRIC PATIENTS	()	()	()	()	()	()	()	()	()	()	()
F - 37	PARTICIPATE AS CO-LEADER IN GROUP THERAPY	()	()	()	()	()	()	()	()	()	()	()
F - 38	PARTICIPATE AS CO-LEADER IN PATIENT-FAMILY GROUP THERAPY	()	()	()	()	()	()	()	()	()	()	()

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F - 39	PARTICIPATE AS MEMBER IN GROUP THERAPY	()	()	()	()	()	()	()	()	()	()	()
F - 40	PARTICIPATE IN CRITIQUE OF PATIENT THERAPY GROUPS	()	()	()	()	()	()	()	()	()	()	()
F - 41	PARTICIPATE IN INFORMAL, UNSTRUCTURED DISCUSSIONS WITH PSYCHIATRIC PATIENTS	()	()	()	()	()	()	()	()	()	()	()
F - 42	PARTICIPATE IN THERAPY GROUP FEEDBACK SESSION WITH PATIENTS	()	()	()	()	()	()	()	()	()	()	()
F - 43	PARTICIPATE IN THERAPY GROUP FEEDBACK SESSION WITH STAFF	()	()	()	()	()	()	()	()	()	()	()
F - 44	PARTICIPATE IN RECREATIONAL THERAPY FOR PATIENTS	()	()	()	()	()	()	()	()	()	()	()
F - 45	PERFORM INDIVIDUAL PSYCHOTHERAPY	()	()	()	()	()	()	()	()	()	()	()
F - 46	PLAN ACTIVITIES FOR PSYCHIATRIC PATIENTS	()	()	()	()	()	()	()	()	()	()	()
F - 47	PLAN SCHEDULE OF DAILY ACTIVITIES FOR PSYCHIATRIC PATIENTS	()	()	()	()	()	()	()	()	()	()	()
F - 48	PREVENT PATIENTS ATTEMPTS AT SUICIDE	()	()	()	()	()	()	()	()	()	()	()
F - 49	PROVIDE FEEDBACK TO PATIENTS DURING GROUP THERAPY	()	()	()	()	()	()	()	()	()	()	()
F - 50	OBSERVE PATIENT IN OCCUPATIONAL THERAPY ACTIVITIES	()	()	()	()	()	()	()	()	()	()	()
F - 51	RECOGNIZE INAPPROPRIATE/DEVIANT BEHAVIOR	()	()	()	()	()	()	()	()	()	()	()
F - 52	RECOGNIZE ROLES PATIENT/STAFF PLAY WITHIN GROUP ENVIRONMENT	()	()	()	()	()	()	()	()	()	()	()
F - 53	RECOGNIZE GROUP PROCESSES IN THERAPY GROUP	()	()	()	()	()	()	()	()	()	()	()
F - 54	REINFORCE APPROPRIATE BEHAVIOR OF PATIENT IN GROUP THERAPY THROUGH OTHER PATIENTS	()	()	()	()	()	()	()	()	()	()	()
F - 55	RESTRAIN/CONTROL PATIENT PHYSICALLY	()	()	()	()	()	()	()	()	()	()	()
F - 56	SCREEN/SURVEY JOBS TO SELECT WORK THERAPY FOR PATIENT	()	()	()	()	()	()	()	()	()	()	()
F - 57	SET LIMITS ON PATIENT BEHAVIOR/DEFINE ACCEPTABLE BEHAVIOR	()	()	()	()	()	()	()	()	()	()	()
F - 58	STOP FIGHTS	()	()	()	()	()	()	()	()	()	()	()
F - 59	SUMMARIZE ACTIVITY OF SESSION DURING GROUP THERAPY	()	()	()	()	()	()	()	()	()	()	()
F - 60	TAKE AWAY/REMOVE PATIENT PRIVILEGES	()	()	()	()	()	()	()	()	()	()	()
F - 61	WATCH/GUARD PATIENT WHO IS ON PRECAUTION, E.G. ESCAPE	()	()	()	()	()	()	()	()	()	()	()
		()	()	()	()	()	()	()	()	()	()	()
		()	()	()	()	()	()	()	()	()	()	()
		()	()	()	()	()	()	()	()	()	()	()
		()	()	()	()	()	()	()	()	()	()	()
	CENTRAL STERILE SUPPLY											
G - 1	COORDINATE CENTRAL STERILE SUPPLY (CSS) ACTIVITIES WITH PROFESSIONAL AND ADMINISTRATIVE SERVICES	()	()	()	()	()	()	()	()	()	()	()
G - 2	DETERMINE METHOD FOR BULK STORAGE OF CSS	()	()	()	()	()	()	()	()	()	()	()
G - 3	DETERMINE SUPPLY OR EQUIPMENT LEVELS FOR CSS	()	()	()	()	()	()	()	()	()	()	()
G - 4	DETERMINE UNITS TO BE SERVED BY CSS	()	()	()	()	()	()	()	()	()	()	()
G - 5	DEVELOP A SUPPLIES OR EQUIPMENT DISPENSING OR COLLECTING SYSTEM	()	()	()	()	()	()	()	()	()	()	()
G - 6	DEVELOP A STERILIZATION SYSTEM FOR PREPARATION IN CSS	()	()	()	()	()	()	()	()	()	()	()
G - 7	DEVELOP AND MONITOR CONTROL MEASURES TO ASSURE STERILITY OF SUPPLIES OR EQUIPMENT	()	()	()	()	()	()	()	()	()	()	()
G - 8	DEVELOP INVENTORY SYSTEM FOR CSS SUPPLIES AND EQUIPMENT	()	()	()	()	()	()	()	()	()	()	()
G - 9	DEVELOP LOCATOR SYSTEM FOR CSS SUPPLIES AND EQUIPMENT	()	()	()	()	()	()	()	()	()	()	()

INVOLVEMENT
a = Assist
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c = Do/Supervise
d = Supervise

TIME SPENT SCALE
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		INVOLVEMENT a	b	c	d	TIME SPENT SCALE 1	2	3	4	5	6	7
G - 10	DEVELOP PICTORIAL CONTENT INDEX FOR BASIC CSS TRAYS/EQUIP	()	()	()	()	()	()	()	()	()	()	()
G - 11	EVALUATE PROCEDURES FOR STORAGE, INVENTORY OR INSPECTION OF PROPERTY ITEMS	()	()	()	()	()	()	()	()	()	()	()
G - 12	EVALUATE THE KINDS AND QUALITY OF SUPPLIES AND EQUIPMENT TO BE PROVIDED BY CSS	()	()	()	()	()	()	()	()	()	()	()
G - 13	MAINTAIN USEAGE RECORDS ON CSS SUPPLIES AND EQUIPMENT	()	()	()	()	()	()	()	()	()	()	()
G - 14	OPERATE DISTILLATION EQUIPMENT	()	()	()	()	()	()	()	()	()	()	()
G - 15	PLAN PHYSICAL LAYOUT OF CSS SECTION	()	()	()	()	()	()	()	()	()	()	()
G - 16	PREPARE ITEMS FOR STERILIZATION	()	()	()	()	()	()	()	()	()	()	()
G - 17	STERILIZE INSTRUMENTS	()	()	()	()	()	()	()	()	()	()	()
G - 18	STERILIZE SUPPLIES	()	()	()	()	()	()	()	()	()	()	()
		()	()	()	()	()	()	()	()	()	()	()
		()	()	()	()	()	()	()	()	()	()	()
		()	()	()	()	()	()	()	()	()	()	()
		()	()	()	()	()	()	()	()	()	()	()
	COMMUNITY HEALTH											
H - 1	ACT AS HEALTH NURSE ADVISOR TO SCHOOL PERSONNEL	()	()	()	()	()	()	()	()	()	()	()
H - 2	ADMINISTER HEARING TESTS	()	()	()	()	()	()	()	()	()	()	()
H - 3	ADMINISTER IMMUNIZATIONS	()	()	()	()	()	()	()	()	()	()	()
H - 4	ADMINISTER VISION TESTS	()	()	()	()	()	()	()	()	()	()	()
H - 5	ASSEMBLE AND MAINTAIN COMMUNITY HEALTH NURSING KIT	()	()	()	()	()	()	()	()	()	()	()
H - 6	ASSIST FAMILIES TO PLAN HEALTH CARE WITHIN THEIR FINANCIAL, EMOTIONAL, AND PHYSICAL RESOURCES	()	()	()	()	()	()	()	()	()	()	()
H - 7	ASSIST FAMILY MEMBERS IN HOME NURSING CARE PRACTICES	()	()	()	()	()	()	()	()	()	()	()
H - 8	ASSIST COMMUNITY COMMUNICABLE DISEASE PATIENTS	()	()	()	()	()	()	()	()	()	()	()
H - 9	ASSIST IN EPIDEMIOLOGICAL STUDIES OF COMMUNICABLE DISEASES	()	()	()	()	()	()	()	()	()	()	()
H - 10	ASSIST IN MEDICAL OR DENTAL EXAMINATIONS OF SCHOOL CHILDREN	()	()	()	()	()	()	()	()	()	()	()
H - 11	CONDUCT COMMUNITY HEALTH HOME VISITS	()	()	()	()	()	()	()	()	()	()	()
H - 12	CONDUCT OR SUPERVISE COMMUNITY HEALTH PROGRAM	()	()	()	()	()	()	()	()	()	()	()
H - 13	CONDUCT PEDIATRIC OUTPATIENT CLINIC	()	()	()	()	()	()	()	()	()	()	()
H - 14	CONDUCT PRE AND POSTNATAL CLINICS	()	()	()	()	()	()	()	()	()	()	()
H - 15	COUNSEL AND INSTRUCT PARENTS ABOUT WELL BABY CARE, E.G. IMMUNIZATION, NUTRITIONAL NEEDS.	()	()	()	()	()	()	()	()	()	()	()
H - 16	COUNSEL PATIENTS REGARDING DRUG USE AND ABUSE	()	()	()	()	()	()	()	()	()	()	()
H - 17	COUNSEL UNWED MOTHERS	()	()	()	()	()	()	()	()	()	()	()
H - 18	DETERMINE IMMUNIZATION REQUIREMENTS	()	()	()	()	()	()	()	()	()	()	()
H - 19	IDENTIFY HOME HEALTH HAZARDS FOR FAMILIES	()	()	()	()	()	()	()	()	()	()	()
H - 20	MAINTAIN A RECORD OR CASE REGISTER SYSTEM OF HOME VISITS	()	()	()	()	()	()	()	()	()	()	()
H - 21	MAINTAIN LIAISON WITH PUBLIC HEALTH OR SOCIAL WELFARE AGENCIES TO PROMOTE QUALITY NURSING CARE	()	()	()	()	()	()	()	()	()	()	()
H - 22	MAKE REFERRALS TO OTHER LOCAL PUBLIC HEALTH AGENCIES FOR PATIENT FOLLOW UP AND CARE	()	()	()	()	()	()	()	()	()	()	()
H - 23	MANAGE AN ADULT OUTPATIENT SUCH AS OB-GYN, CANCER DETECTION, FAMILY PLANNING	()	()	()	()	()	()	()	()	()	()	()

INVOLVEMENT
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		INVOLVEMENT a	b	c	d	TIME SPENT SCALE 1	2	3	4	5	6	7
H - 5	ASSEMBLE AND MAINTAIN COMMUNITY HEALTH NURSING KIT	()	()	()	()	()	()	()	()	()	()	()
H - 6	ASSIST FAMILIES TO PLAN HEALTH CARE WITHIN THEIR FINANCIAL, EMOTIONAL, AND PHYSICAL RESOURCES	()	()	()	()	()	()	()	()	()	()	()
H - 7	ASSIST FAMILY MEMBERS IN HOME NURSING CARE PRACTICES	()	()	()	()	()	()	()	()	()	()	()
H - 8	ASSIST COMMUNITY COMMUNICABLE DISEASE PATIENTS	()	()	()	()	()	()	()	()	()	()	()
H - 9	ASSIST IN EPIDEMIOLOGICAL STUDIES OF COMMUNICABLE DISEASES	()	()	()	()	()	()	()	()	()	()	()
H - 10	ASSIST IN MEDICAL OR DENTAL EXAMINATIONS OF SCHOOL CHILDREN	()	()	()	()	()	()	()	()	()	()	()
H - 11	CONDUCT COMMUNITY HEALTH HOME VISITS	()	()	()	()	()	()	()	()	()	()	()
12	CONDUCT OR SUPERVISE COMMUNITY HEALTH PROGRAM	()	()	()	()	()	()	()	()	()	()	()
H - 13	CONDUCT PEDIATRIC OUTPATIENT CLINIC	()	()	()	()	()	()	()	()	()	()	()
H - 14	CONDUCT PRE AND POSTNATAL CLINICS	()	()	()	()	()	()	()	()	()	()	()
H - 15	COUNSEL AND INSTRUCT PARENTS ABOUT WELL BABY CARE, E.G. IMMUNIZATION, NUTRITIONAL NEEDS	()	()	()	()	()	()	()	()	()	()	()
H - 16	COUNSEL PATIENTS REGARDING DRUG USE AND ABUSE	()	()	()	()	()	()	()	()	()	()	()
H - 17	COUNSEL UNWED MOTHERS	()	()	()	()	()	()	()	()	()	()	()
H - 18	DETERMINE IMMUNIZATION REQUIREMENTS	()	()	()	()	()	()	()	()	()	()	()
H - 19	IDENTIFY HOME HEALTH HAZARDS FOR FAMILIES	()	()	()	()	()	()	()	()	()	()	()
- 20	MAINTAIN A RECORD OR CASE REGISTER SYSTEM OF HOME VISITS	()	()	()	()	()	()	()	()	()	()	()
H - 21	MAINTAIN LIAISON WITH PUBLIC HEALTH OR SOCIAL WELFARE AGENCIES TO PROMOTE QUALITY NURSING CARE	()	()	()	()	()	()	()	()	()	()	()
H - 22	MAKE REFERRALS TO OTHER LOCAL PUBLIC HEALTH AGENCIES FOR PATIENT FOLLOW UP AND CARE	()	()	()	()	()	()	()	()	()	()	()
H - 23	MANAGE AN ADULT OUTPATIENT SUCH AS OB-GYN, CANCER DETECTION, FAMILY PLANNING	()	()	()	()	()	()	()	()	()	()	()
H - 24	ORGANIZE OR MONITOR RABIES CONTROL PROGRAM	()	()	()	()	()	()	()	()	()	()	()
H - 25	PREPARE ANTEPARTAL TEACHING	()	()	()	()	()	()	()	()	()	()	()
H - 26	PERFORM DIAGNOSTIC TESTS SUCH AS PKU OR PATCH TESTS IN A COMMUNITY HEALTH SETTING	()	()	()	()	()	()	()	()	()	()	()
H - 27	PERFORM NEWBORN, WELL BABY OR CHILD DEVELOPMENTAL EXAMS	()	()	()	()	()	()	()	()	()	()	()
H - 28	PERFORM SCHOOL NURSE DUTIES	()	()	()	()	()	()	()	()	()	()	()
H - 29	PLAN AND MAINTAIN A CASE LOAD	()	()	()	()	()	()	()	()	()	()	()
H - 30	PLAN COMMUNITY HEALTH NURSING PROGRAM FOR COMMUNITY	()	()	()	()	()	()	()	()	()	()	()
31	PREPARE EMERGENCY REPORTS SUCH AS INJURY, ANIMAL BITE OR POISONING REPORTS	()	()	()	()	()	()	()	()	()	()	()
H - 32	RECOMMEND INFANT FORMULA CHANGES OR FEEDING SCHEDULES	()	()	()	()	()	()	()	()	()	()	()
H - 33	REMOVE SUTURES	()	()	()	()	()	()	()	()	()	()	()
H - 34	REPORT ENVIRONMENTAL HEALTH HAZARDS	()	()	()	()	()	()	()	()	()	()	()
H - 35	SCHEDULE CLINIC APPOINTMENTS	()	()	()	()	()	()	()	()	()	()	()
H - 36	SCREEN OUTPATIENTS TO DETERMINE THEIR CLASSIFICATION OR PRIORITY OF TREATMENT	()	()	()	()	()	()	()	()	()	()	()
H - 37	SUPERVISE HOME NURSING CARE PRACTICES OF FAMILY MEMBERS OR ANCILLARY PERSONNEL	()	()	()	()	()	()	()	()	()	()	()
H - 38	TEACH FAMILY PLANNING CLASSES AND MAKE REFERRALS	()	()	()	()	()	()	()	()	()	()	()
39	TEACH OR SUPERVISE INFANT CARE	()	()	()	()	()	()	()	()	()	()	()
H - 40	TEACH PRE OR POSTNATAL CLASSES TO PARENTS	()	()	()	()	()	()	()	()	()	()	()
H - 41	TEACH SEX EDUCATION	()	()	()	()	()	()	()	()	()	()	()

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